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## **COVER LETTER**

TO: Registration Solution of Col				
SUBJECT:	Sani Co Name of Lim	FL LIC		
	Name of Lim	ited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Vict	Name of Person	<u>rona</u>	
	Sani	CO FL UL Firm/Company	<del></del> _	
	<u>Leui sw</u>	104th Ter #102	<u>L</u>	
	<u>pembroke</u> f	City/State and Zip Code	<u>-</u>	
	Vgmende. E-mail address: (1)	ZOVETME.OFG	fication)	
For further information of	concerning this matter, please ca	all:		
Victor G.	Mendez-Corona of Person	at ( <u>\$U</u> ) <u>708 -</u> Area Code Daytim	1345 ne Telephone Number	
Enclosed is a check for t	he following amount:			20
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate Certified Ce (additional co	of Status & T
Mailing Addre Registration		<u>Street Address:</u> Registration Se	ction	: 23 Aff
Division of C		Division of Cor		
P.O. Box 632		The Centre of T		
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	)

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)			
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 워낙 000 니 38년</u> .	were filed on 09 23 2024 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here:			
The Emco Group LLC The new name must be distinguishable and contain the words "Limited Liability".	ty Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	601 SW 104th Ter			
(Principal office address MUST BE A STREET ADDRESS)	#102			
	#102 pembroke pines FL 33025			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ddress on our records, enter the name of the new registered			
Name of New Registered Agent: VICTOR 6	a. Mendez-Corona			
New Registered Office Address: UN SW	U 104th Ter #102  Enter Florida street address ,			
pembroke	VINES Florida 3302 F			
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rowided for in Chapter 605, F.S. Or, if this document is			

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Title Name Address		Type of Action		
AMBR Victor G. Mendez		GOISW104MTer#102			
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in effective date is list ote: If the date inse	ed, the date must be specific ar crted in this block does not	ad cannot be prior to da meet the applicable	te of filing or more tha statutory filing reau	n 90 days after fili irements, this da	ng.) Pursuant to te will not be	605,020 listed a
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ecord specifies a de	elayed effective date, but no	ot an effective time,	at 12:01 a.m. on the	earlier of: (b)	2024 DES 3	۰ fter the
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	Signature of a	a member or authorized	l representative of a m	ember		-