## L01000011742

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A. RIVERS
JUL 2 8 2023

## COVER LETTER

TO:

TO: Registration Se Division of Cor					
	estments LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	indence concerning this matter	to the following:			
	Julio Mederos		_		
		Name of Person	<del></del>		
	Thomas Investments  Firm/Company				
		Firm/Company			
	205 SW 135 Ave				
	<u></u>	Address	<del> •••</del>		
	Miamoi, Fla , 33184				
		City/State and Zip Code	<del></del>		
	julmede@aol.co.m	to be used for future annual report not	(Constant)		
For further information c	oncerning this matter, please c		meanony		
Julio Mederos		786 547-9521 at ()			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:	action		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of	The Centre of Tallahassee		
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810		

Tallahassee, FL 32303

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nome of the Limited Liability Company as it now appear	are on our records )
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	nis ou our recorus.
The Articles of Organization for this Limited Liability Company were filed on $rac{7}{2}$	/18/2001 and assigned
Florida document number L01000011742	
Torida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company h	<u>iere</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
The state of the s	
THICIPAL OFFICE AUGUST BE A STREET ADDRESS	
Enter new mailing address, if applicable:	
•	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our	records, enter the name of the new regi
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	•
Enter Flo	orida street address
	Ċ
	, Florida
Cuv	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Veronica T Rodriguez	13520 SW 2 St, Miami, Fla 33184	≣Add
			□Remove
MGR	George T Rodriguez	13520 SW 2 St, Miami, Fla 33184	<b>≡</b> Add
			□Remove
			□Add
			□Remove
			Change
			□ Add
		<del> </del>	□Remove
			□Change
		_	□Add
		□Remove	
			□Change
			□Add
			□Remove
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- <del></del>			<del> </del>
fective date, if other than	the date of filing:	(opti to date of filing or more than 90 days after	onal)
ite: If the date inserted in this	s block does not meet the application	able statutory filing requirements, thi	s date will not be listed as
cument's effective date on the	e Department of State's records.		
ecord specifies a delayed effer is filed.	ctive date, but not an effective ti	me, at 12:01 a.m. on the earlier of: (b	) The 90th day after the
ted	$\mathcal{A}$		
	7/	_ ·	
	Wether	Er.	
1	Signature of a member or author	orized representative of a member	
/	TUE16	MEDEROS	
		ed name of signee	<del> </del>

Filing Fee: \$25.00