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			Division of Corporations
			Fax Number : (850)617-6383
		From:	
		ဟ	Account Name : KAUFFMAN THOMPSON, PLLC
	22	₩ <u>₹</u>	Account Number : I20210000121
E			Phone : (941)479-3006
	\subseteq	- 5€G	Fax Number : (941)777-4577
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company has been notified in writing of this change.

(((H24000197283 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa-	ny as it now appears on our rece	ords)
(Name of the Limited Liability Compa) (A Florida Limited L	lability Company)	errer)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
rticles of Organization for this Limited Liability Company were filed on 10/23/2002 a document number 1.02000028235 mendment is submitted to amend the following: mending name, enter the new name of the limited liability company here: I name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrev new principal offices address, if applicable: ipal office address MUST BE A STREET ADDRESS) mew mailing address, if applicable: ing address MAY BE A POST OFFICE BOX) mending the registered agent and/or registered office address on our records, enter the name of and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_
(Principal office address MUST BE A STREET ADDRESS)		
		.:::
		35 71 A
Enter new mailing address, if applicable:		الم (مراد) المراد (مراد) المراد (مراد)
		<u> </u>
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>ent</u>	er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress .
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office t	performance of my duties, rovided for in Chapter 60,	and I am familiar with and 5, 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> MGRM	<u>Name</u> HUGO C. NUNEZ	Address 6920 SCRUB JAY DRIVE	Type of Action
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		SARASOTA, FL 34241	■Remove
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(If an effec <u>Note:</u> If	c date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be at's effective date on the Department of State's records.	605.0207 (3)( listed as the
If the record record is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	after the
Dated _	· · · · · · · · · · · · · · · · · · ·	
	Signature of a member or authorized representative of a member	-

Filing Fee: \$25.00

(((H24000197283 3)))

IN WITNESS WHEREOF, the undersigned have signed these Articles of Amendment to the Articles of Organization of Mi Pueblo Enterprises, LLC (the "Company"), effective as of the date(s) set forth below, as Members of the Company, and we affirm, under the penalties of perjury, that the facts stated herein are true.

Manager: (current/remaining

remaining (manager

BONIFACIO CARO

May 24, 2024

Manager: (outgoing manager)

HUGO Ç. NUÑEZ

May 30, 2024

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