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| (Requestor's Name) | | | | |
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| 4460 CARVERST. | | | | |
| LAKO WORTH F133461 | | | | |
| CALO WOLL !!! | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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TRANSMITTAL LETTER

| Division of Co | | | |
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| SUBJECT: _Flo | aida Elife Mo | Hage UC | · · · · · · · · · · · · · · · · · · · |
| | (Name of L | imited Liability Company) | 135 |
| | | | 高 |
| The enclosed Articles | of Amendment and fee(s) are su | bmitted for filing. | MAY 26 PI |
| Please return all corres | pondence concerning this matte | r to the following: | FAS I |
| | Clana W |) FERNANDEZ Name of Person) | MISMAY 26 PM 1: 20 MINISMAN 26 PM 1: 20 MI |
| | Florida El | HE MOKTAGE, L | 16_ |
| | 4460 Cawel | L Straet (Address) | |
| | LAKE Worth | F1 33461 /State and Zip Code) | . |
| For further information | concerning this matter, please of | rall. | |
| . 1 | <u> </u> | can. | _ |
| Clara | W. FEMANDEZ | at (561 43) (Area Code & Daytim | 6 - 635 (e Telephone Number) |
| | (Name of Person) | (Area Code & Daytime | e Telephone Number) |
| Enclosed is a check for the | e 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) |
| | | | |

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF (A Florida Limited Liability Company) The Articles of Organization were filed on the belief of Sand assigned document number 13081 FIRST: SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited Delete Hautha Couceino As MANAging MEMBER, AND FROM the LLC. liability company: - ADD Rolando FELNANDEZ AS A MANAging MEMberl. Signature of a member or authorized representative of a member Clasa W Feenandez

Typed or printed name of signee

Filing Fee: \$25.00