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## **COVER LETTER**

	vision of Corp			
SUBJECT:		AND ASSOCIATES, PL		
Source.		Name of Lin	nited Liability Company	
The enclose	d Articles of /	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspoi	idence concerning this matter	to the following:	
		IVAN PARRON	SOCIATES, PL  Name of Limited Liability Company  Dent and fee(s) are submitted for filing, oncerning this matter to the following:  N PARRON  Name of Person  RON AND ASSOCIATES, PL  Firm/Company  SW 108TH ST  Address  MI, FL 33176  City/State and Zip Code  ARRON.LAW  E-mail address: (to be used for future annual report notification)  g this matter, please call:  at (  Area Code)  Daytime Telephone Number  1. S60.00 Filing Fee &   2. S60.00 Filing Fee.	
			Name of Person	
		PARRON AND ASSOCIA	ATES, PL	
			Firm/Company	<del></del>
		9921 SW 108TH ST		
			Address	
		MIAMI, FL 33176		
		IP@PARRON.LAW	City/State and Zip Code	<del></del>
		E-mail address: (	to be used for future annual report notific	ation)
For further i	nformation co	incerning this matter, please c	all:	
IVAN PAR	RON		305 459-3349 at ()	
	Name of	Person	Area Code Daytime	elephone Number
Enclosed is:	a check for the	e following amount:		
≣ \$25.00 1	Filing-Fee -	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

PARRON & ASSOCIATES, PL (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/15/2006 \_ and assigned Florida document number \_ L06000050095 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 9921 SW 108th St Enter new principal offices address, if applicable: Miami, FL 33176 (Principal office address MUST BE A STREET ADDRESS) 9921 SW 108th St Enter new mailing address, if applicable: Miami, FL 33176 (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 registered agent and/or the new registered office address here: Name of New Registered Agent: 9921 SW 108th St Miami, FL 33176 New Registered Office Address: Enter Florida street address \_, Florida 33176 Zip Code Miami

## 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.

Cirr

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	IVAN PARRON	9921 SW 108th St	□Add
		Miami, F1. 33176	□Remove
			≅Change
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		05/20/2021				
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cord specifies a delayed s filed.	effective date, but no	ot an effective tir	ne, at 12:01 a.m.	on the earlier of:	(b) The 90th d	ay after th
) med.						
ed		2024	7			
	/		/			
<del></del>	Signature of:	a member or autho	rized representative	of a member		
1 25	1-					
Ivan Parron						

Filing Fee: \$25.00