Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

COCO'S CARE LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	COCO'S CARE LLC		•		
(Name of the Limit	ted Liability Company as it now app. (A Florida Limited Liability Company	ears on our records.)			
The Articles of Organization for this Limited L	iability Company were filed on	06/20/2006	and a	ssigned	d
Florida document number L06000062510					
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liability company	here:			
The new name must be distinguishable and contain the v	vords "Limited Liability Company," the	e designation "LLC" or the	abbreviation "]	L.L.C."	
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable:			Q# ≥Sc	2	
(Mailing address MAY BE A POST OFFICE	BOX)		ĘĞ	0 15	
			70 70	EC	
			385 838	<u>-</u>	E
B. If smending the registered agent and/or ragent and/or the new registered office address	egistered office address on our is here:	records, enter the na	me of the ne	voneg	istere
			S-TA L-OR	5	
Name of New Registered Agent:	Roberto Barreras	,,	200	2	
New Registered Office Address:	10670 SW 7th Terrace				
		lorida street address			_
	Miami	, Florida	33174		
	City		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 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

Title	Name	Address	Type of Action
CEO	Roberto Barreras,	10670 SW 7th Terrace, Miami FL 33174	🗟 Add
	With 50% Ownership of the Company		□Remove
			□ Change
AMBR	Jorge O. Zerquera	10670 SW 7th Terrace, Miami FL 33174	□ Add
	With 50% Ownership of the Company		DRemove
			\BChange
			□ Add
			□ Remove
			Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			Change
*			🗆 Add
			□ Remove
			□Change

If amending any other information, en	ter change(s) here: (Attach additional sheets, i	f necessary.)
Company of the Compan		
Note: If the date inserted in this block does	filing: December 1, 2021 fic and cannot be prior to date of filing or more than 90 day not meet the applicable statutory filing requirement of State's records.	ts, this date will not be listed as
e record specifies a delayed effective date, board is filed.	ut not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Dated November 22	<u>2021</u>	I DEC - LARAS
	\m\\.	SER T
Signatur	e of a member or authorized representative of a member	
	Jorge O. Zerquera	1 10: 5 Stati

Filing Fee: \$25.00