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COVER LETTER

TO:	 Registration Section
	Division of Corporations

ALMAZAN & ASSOCIATES LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL ALMAZAN

Name of Person

ALMAZAN & ASSOCIATES LLC

Firm/Company

15706 SW 44 STREET

Address

MIAMI, FL 33185

City/State and Zip Code ALMAZAN1214@GMAIL.COM

Fo	E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call:			2018 SE	T		
DANIEL ALMAZAN		305 at ()	389-1237		P 24	Banaran Si≥ranar G	
	Name of		Area Code	Daytime Telephone Numb		3 :8 MV	
En	closed is a check for th	ie following amount:			22	Ø ĥ	
	\$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy		Filing Fee, cate of Status	æ	

(additional copy is enclosed)

Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AEMAZAN & ASSOCIATES LLC.

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organizatic	on for this Limited Liability Company were filed on 06/11/2007	and assigned
Florida document number	L07000061284	

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."

Enter new principal offices address, if applicable:

(Principal office address MUST 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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:				2010 2	
New Registered Office Address:			N.S.	EP 2	areasy.
	Enter Florida stro			4 A	T FFr
	City	, Florida	Zip:Code	<u></u>	
New Registered Agent's Signature, if changing Registered Agent:				l∿) d∎n	

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

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	DANIEL LA ROSA	15706 SW 44 STREET MIAMI, FL 33185	O Add
			Remove
			□ Change
			Add
			Remove
			Change
		<u> </u>	Add
			Remove
			Change
			Remove
			Change
			🗆 Add
		<u> </u>	Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	2018 SEP 24
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	(IS)

09/18/2018

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	SEPTEMBER 18 - 2018
Pareu	
	/ un masan
	Signature of a member or authorized representative of a member
	DANIEL ALMAZAN
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00