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C. GOLDEN FEB - 8 2019

COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: ______CAN I HAVE YOUR ATTENTION, LLC. 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: <u>HUMBERTO M. AREAS</u> Name of Person <u>CAN I HANE YOUR ATTENTION, LLC</u> Firm/Company <u>1421 SW 1074</u> <u>AVENUE #126</u> <u>Address</u> <u>MIAMI, FL 33174</u> <u>City/State and Zip Code</u> <u>E-mail address: (to be used for future annual report notification)</u>
For further information concerning this matter, please call:

HUMBERTO M. AREAS at (305) 282-5211 Name of Person Daytime Telephone Number

Enclosed is a check for the 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)

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		
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0	F	
CAN I HAVE YOUR A	HTTENTION, LLC	2019 FEB - 1 PM 5: 48
(Name of the Limited Liability Compa (A Florida Limited L		INLEAHL SSEE, FI
The Articles of Organization for this Limited Liability Company	were filed onØ8/27/	200 Find assigned
Florida document number $L \emptyset 7 \emptyset \emptyset \emptyset \emptyset 88161$		0
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1421 SW 1074 A	IVENUE #126
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 331	74
	<u> </u>	
Enter new mailing address, if applicable:	1421 SW 107地	AVENUE #126
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33	174
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent: HUM	BERTO M. AR	EAS
	SIN ID7 th AVEN	

New Registered Office Address:

72 300 101=	<u>ANCINUL</u>	#120			
Enter Florida 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

Page 1 of 3

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

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	<u>Type of Action</u>
MGR	CLEVELAND M. COOK III	100 ALTON ROAD	3A□ Add
		MIAMI BEACH, FL 3313	9 Remove
			Change
MGR	YERICA E. AREAS	1421 SW 107 AVE. #12	26 🗶 Add
		MIAMI, FL 33174	Remove
			Change
			O Add
			C Remove
			Change
			🗆 Add
			CRemove
			🖸 Change
			O Add
			🛛 Remove
			Change
			Add
			_ Remove
			_ Change

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

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E. Effective date, if other than the date of filing: ______(optional) (If an effective 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 605.0207 (3)(b)

(If an effective 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 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

NUARI Dated Signature of a member or authorized representative of a member AREAS HUMBERTO M. Typed or printed name of signee

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Filing Fee: \$25.00