Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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	Division of Cor	porations		
	Fax Number	: (850)617-6383		
From:				
	Account Name	: GUZMAN & GUZMAN, P.A.		
	Account Number	: 120080000090		-
	Phone	: (305)670-1991	۰۰ میشد د د د	•
	Fax Number	: (305)670-1993		⇒-
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*Enter	the email address	for this business entity to be used for ngs. Enter only one email address please	future	-
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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DESPILLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ards.)
The Articles of Organization for this Limited l Florida document number <u>L11000037958</u>	Liability Company	were filed on 03/29/2011	and assigned
This amendment is submitted to amend the fol			
A. If amending name, enter the new name			
The new name most be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I	LC" or the abbreviation "L.C."
Enter new principal offices address, if appli	icable:	9130 S DADELAND BLVI) STE 1509
(Principal office address MUST BE A STREET ADDRESS)		MIAMI FL, 33156	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	: <u>BOX)</u>	9130 S DADELAND BLVI MIAMI FL, 33156) STE 1509
B. If amending the registered agent and registered agent and/or the new registered of	office address her	<u>c</u> :	rds, enter the name of the no
Name of New Registered Agent:	m: GUZMAN & GUZMAN P.A.		
New Registered Office Address:	9130 S DADELAND BLVD STE 1509		
		Enter Florida street ada	
	MIAMI		Florida 33156
		Сиу	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			Change
			Add
			☐ Remove
			Change
			□ Remove
			☐ Change
			Add
			Remove
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. <u>. </u>			Add
			☐ Remove
			☐ Change

, 11 4 110	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note	(optional) Tective date, if other than the date of filing: Tective 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 (3Xb) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the red) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	AUGUST 13. 2019
Dateu	X Signature of a member or authorized representative of a member
	OLIVERA, SILVIA G
	Typed or printed name of aignee