## L11 0000 42320

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(0.13) 2.35
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

	egistration Se ivision of Cor				
elib ie <i>c</i> a		outsoursing solutions llc			
SUBJECT	Name of Limited Liability Company				
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	ırn all correspo	ndence concerning this matter	to the following:		
		Ricardo de la paz			
		Rdp Accounting	Name of Person	<del> </del>	
		13382 SW 128th st	Firm/Company		
		miami, fl 33186	Address		
		ric@rdpaccountingservices.	City/State and Zip Code com	<del></del>	
		E-mail address: (	to be used for future annual report noti	fication)	
For further	r information c	oncerning this matter, please ca	all:		
Ricardo de	e lapaz		783 2869478 at ()		
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed i	s a check for th	ne 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:

٠.

TO:

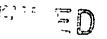
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO **OF**

ARTICLES OF ORGANIZATION



CARIBBEAN OUTSOURCING SOLUTIONS LLC

<u> 2019</u>	SED.	<u>-6</u>	PH	3:
				- 1 *

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

(A Ferna Sauces	Endonity Company)	<i>;</i>
The Articles of Organization for this Limited Liability Company	were filed on <u>04/08/2</u>	2011 and assigned
Florida document number L11000042320		
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 Liabi	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9107 NW 105 WAY	,
(Principal office address MUST BE A STREET ADDRESS)	MEDLEY FL 33178	}
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		r records, <u>enter the name of the r</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	•	гір соце
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ee to act in this capa	

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	RUDDY MANUEL VARGAS TOLEDO	13686 SW 33RD TER	
		NATANA DI 22175	■ Add
		MIAMI, FL 33175	□ Remove
		<del></del> .	Change
		<del> </del>	Add
			□ Remove
			☐ Change
			Add
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	***************************************		Add
			□ Remove
		·	☐ Change

	<del></del>
Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier e 90th day after the record is filed.
Dated	109/04/2019 Du Now
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00