

LI1000051041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Received
06-07

Office Use Only



300362420863

06/08/21--01019--008 **25.00

2021 JUN -7 A 11:24

2021 JUN -7 A 11:24

S.C.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2021

NODA, ROGELIO
15763 S.W. 82 ST
MIAMI, FL 33193

SUBJECT: SIDERIA ENTERPRISES, LLC
Ref. Number: L11000051041

We have received your document for SIDERIA ENTERPRISES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Summer Chatham
OPS

Letter Number: 421A00010406

2021 JUN -7 A 11:24

2021 JUN -7 A 11:24

2021 JUN -7 PM 3:16

RECEIVED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SIDERIA ENTERPRISES, LLC

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

The Articles of Organization for this Limited Liability Company were filed on April 4, 2011 and assigned
Florida document number LI1000051041.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NODA, ROGELIO

New Registered Office Address:

15763 SW 82 ST

Enter Florida street address

MIAMI

City

Florida

33193

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	NODA, ROGELIO	15763 SW 82 ST	<input type="checkbox"/> Add
		MIAMI, FL 33193	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	NODA, RAFAEL	1436 SW 124TH PL	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33184	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	NODA PUIG, WILFREDO	235 NW 2ND ST	<input checked="" type="checkbox"/> Add
		HOMESTEAD, FL 33030	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2/21
JUN-7
A 11:24
FD

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

N/A

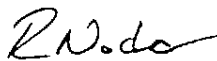
E. Effective date, if other than the date of filing: MARCH 23, 2021 (optional)

(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(b)

Note: 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.

Dated MARCH 23 2021



Signature of a member or authorized representative of a member

ROGELIO NODA

Typed or printed name of signee

FILED
2021 JUN 7 A 11:24