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SECRETARY OF STATE
TALLAHASSEE FLORIBA

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## **COVER LETTER**

TO: Registration Se Division of Con			
SUBJECT:	azmin Sal	gado LLC	
	Name of Limi	Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Jazmir	Salgado Name of Person	
	_Jarmir	Salgado (	LC
	67 E. S	south Street	
	Orlando 1  unitaltax	City/State and Zip Code Services Loomai to be used for future annual report notificat	J. COM
For further information co	oncerning this matter, please o	all:	
Jazmin Name o	Salgado Person James de la companya della companya della companya de la companya della companya	at ( 407) 634 ~ ( Area Code & Daytime To	0945 elephone Number
Enclosed is a check for th	_		2015 J
☑ \$25.00 Filing Fee	□\$30.00 Filing Fec & Certificate of Status	. \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copyrig-enclosed)  (additional copyrig-enclosed)
Registra Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Clast- 11 1

Jazmin Salgudo U-C
(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
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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: 68 E. South Street
(Principal office address MUST BE A STREET ADDRESS) Or lando, FC 32801
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, enter the name of the new registered agent and/or segment and/or registered office address on our records, enter the name of the new registered office address bore.
registered agent and/or the new registered office address here:
Name of New Registered Agent: Jazmin Salgado
New Registered Office Address: 681 East South Street: 5
Or by Coty, Florida 32861
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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
AHBR	United Tax Holdings	233 State Road 16	2 Add
	LLU	233 State Road 16 St. Augustine, FL	Remove
		37084	
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			Add EAdd
			Remove
		7	REMOVES Add
		RD.	Add Add
			Remove

ramenang any other mornation,	enter change(s) here: (Attach additional sheets, if necessary.)
1 1 1	
d <u>Aecember</u> 318	
January Company	- Solando
Signature	e of a member or authorized representative of a member
- Manage	$\leq 100  \text{dd}$

Page 3 of 3

Filing Fee: \$25.00

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