## Florida Department of S

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000121783 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JFS CONSULTING SERVICES LLC

Account Number : I20220000092 Phone : (786)440-5553 Fax Number : (786)279-5272

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

P11	And also a second			
FWGTT	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BARZA666 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

MAR 3 1 2023

K. Brumblay

## **COVER LETTER**

TO:

Registration Section

Division of C	orporations	•			
Barza666	SLLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Jorge Schneider				
		Name of Person			
	JFS Consulting Services				
		Firm/Company	<del></del>		
	2627 NE 203rd Ste 218				
		Address			
	Aventura, FL 33180				
		City/State and Zip Code	<del></del>		
	Pschneider@jfsbizup.com				
		to be used for future annual report no	incation)		
For further information	concerning this matter, please c	ali:			
Jorge Schneider		786 4405553 at ()			
Name	of Person	Area Code Daytii	ne 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 Addr Registration	Section	Street Address: Registration So Division of Co			
P.O. Box 61	Corporations 327	The Centre of	•		
Tallahassee	, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on clability Company)  were filed on 10/07/20		a	nd ass	igned
	011	a	nd ass	igned
ility company baras				
lite company horo				
nity company nere.				
ity Company," the designs	ation "LLC" or the	e abbreviat	ion "L.	IC."
12755 SW 93rd Ave				
Miami FL, 33176				
12755 SW 93rd Ave				
Miami FL, 33176				
ddress on our record	is, <u>enter the na</u>	ame of th		/ registe
ST STF 218				
<del></del>	reet address		<u> </u>	1,75
	, Florida	33180	Pin	——————————————————————————————————————
City	<b>_</b>	Zip		
	12755 SW 93rd Ave Miami FL, 33176  12755 SW 93rd Ave Miami FL, 33176  ddress on our record g Services LLC  ST STE 218  Enter Florida sta	12755 SW 93rd Ave Miami FL, 33176  12755 SW 93rd Ave Miami FL, 33176  ddress on our records, enter the name of the second street address the second street address for the following street address for the second stree	ity Company." the designation "LLC" or the abbreviated 12755 SW 93rd Ave  Miami FL, 33176  12755 SW 93rd Ave  Miami FL, 33176  ddress on our records, enter the name of the structure of the stru	ity Company." the designation "LLC" or the abbreviation "L.1  12755 SW 93rd Ave  Miami FL, 33176  12755 SW 93rd Ave  Miami FL, 33176  ddress on our records, enter the name of the new  g Services LLC  ST STE 218  Enter Florida street address  , Florida  33180

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>	Address	Type of Action
MGR	Veronica Bakaric	12755 SW 93rd Ave	<b>≡</b> Add
		Miami FL. 33176	🖸 Remove
		****	□Change
	***************************************		🗆 Add
			□Remove
			□ Change
		<del></del>	
			□Remove
			☐ Change
<del></del>	<del></del>		□Add
			□ Remove
			Change
<del> </del>	<del></del>		□ Add
			□Remove
		······································	□ Change
<del></del>			
			Remove
			□ Change

· · · · · · · · · · · · · · · · · · ·					
	····	<u> </u>			
			-		
					<del></del>
	<del></del>				
	<del></del>				
	<del></del>				<del></del>
				•	<u>-</u>
<del></del>					
Effective date, if other than the offen effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ck does not meet the a	applicable statutur	ig or more than 90 day y filing requiremen	(optional) a after filing.) Pursuant t is, this date will not b	to 605.020 e listed to
e record specifies a delayed effective rd is filed.	date, but not an effec	tive time, st 12:01	a.m. on the earlier	of: (b) The 90th day	after the
Dated March 31st	. 23	·	Mint	) J	
			(114)		

Filing Fee: \$25.00