112000038533

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
•	•	•
(Do	ocument Number)	<u> </u>
•	Ź	
Certified Copies	Certificate	s of Status
	_	
Special Instructions to	Filing Officer:	
,		
		ļ
· · · · · · · · · · · · · · · · · · ·		

Office Use Only



200249816472

07/18/13-+01021--016 **25.00

SECRETARY OF STATE.

N. Cuffgan JUL 19 20181

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Res D Bu Name of Limite	Iders UC d Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Jamie	Garcia-Pre	eraf
	ResC	Sarcia-Pre Name of Person Bulders L Firm/Company	LC_
	10790 SW	47th Terrace Address	
•	miam	FL 33165 City/State and Zip Code	
	E-mail address: to	arcialba cma be used for future annual report notification	(1) (OM)
	ncerning this matter, please cal		
Jamié 6 Namo of	arcia-Preva, Person	1 at (786) 237 - 83 Area Code & Daytime Te	342 Jephone Number
Enclosed is a check for the	e 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

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2013 JUL 18 PH 12: 56 GECRETARY OF STATE ed Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on $\frac{3/20/12}{}$ and assigned Florida document number <u>L_12000038533</u> 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: (Principal office address MUST BE A STREET ADDRESS) 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 the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida ___ City

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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
			Remove		
			Add		
			Remove		
			Add		
			Add		
			Remove		
-,, 			Add		
			Remove		
			.		
			Add		
			Remove		

D. It amending any other information, enter change(s) here: (Attach daditional sheets, if necessary.)
Please change my title Jamie Garcia Preva
From PRES (President) to MGRM Managing
Member as per my Financial
Institution requires it in order to
open & operate arracount with them.
Dated $\frac{9}{16}$, $\frac{8013}{16}$.
Family Harciar Preval
Signature of a member or authorized representative of a member
() Jamie Garcia - Preval
Typed or printed name of signee
Page 3 of 3

ragesors

Filing Fee: \$25.00

FILED:
2019 JUL 18 PM 12: 56
SECRETARY OF STATE