L12000062946

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COVER LETTER

TO: Registration S Division of Co			. I
	NS GALLERIES, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	EDUARDO HERNANDE	Z-CARSTENS	l:
	-	Name of Person	
		Firm Company	
	3496 Pine Haven Circle		
	Boca Raton, ΓΕ 33431	Address	
	earstensgalleries@yahoo.cc	City State and Zip Code om to be used for luture annual report notif	lication)
For further information	concerning this matter, please e	ali:	
EDUARDO HERNAN	DEZ-CARSTENS	56) 212-9413 at ()	
Name	of Person		e Telephone Num be r
nuclosed is a check for i	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & Certificat Copy (additional conv.is enclosed)
Mailing Addre Registration Division of G P.O. Box 63. Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 8 10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARSTENS GALLERIES, LLC

(Name of the Limited Liabil) (A Florid	ity Company as it now appears on our recoal Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability C	•	and assigned
Florida document number L12000062946		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "L	LC" of the abbreviation "L.L.C."
Enter new principal offices address, if applicable:]
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
is the integrition of the integral of the inte	Enter Florida street addi	resy
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:	
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence to the obligations of my position as registered ago the obligations of my position as registered ago the properties of the registere company has been notified in writing of this change.	omplete performance of my duties, gent as provided for in Chapter 60?	and I am familiar with and 5. F.S. Or, if this document is
	If Changing Registered Agent, Signature	e of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address	of each	person	heing addec
or removed from our records:	1		

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Bonnibelle Hernandez-Carstens	3496 Pine Haven Circle	□Add
		Boca Raton, FL 33431	Remove
MGR	Claudio F Calderon	1415 SW 27th Avc. Apt 101	□ Change
		Delray Beach, FL 33445	☐ ☐ Remove
			☐ Change
			□Add
			☐ ☐ Remove
			☐ Change
] Add
			□Remove
			☐ Change
			□Add
			∏ ⊒Remove
		-3	□Change
			<u>D</u> ∧dd
			∐ ⊒Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	(necessary.)
	
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04 22 2024	
Effective date, if other than the date of filing:	o ptior(ál) after tiling.) Pursuant to 605 0207 (3)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	, this date will not be listed as the
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of ord is filed.	f: (b) The 90th day after the
Dated	,
le Henondez Constr	
Signature of a member or authorized representative of a member	
EDUARDO HERNANDEZ-CARSTENS	
Typed or printed name of signee	<u> </u>
·· · · · ·	

Filing Fee: \$25.00