## 1390006331

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## **COVER LETTER**

TO: Registration Division of 0	ı Section Corporations		<b>"</b>
Hernand Hernand	de Lee Martinez, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Eric Hernandez		
		Name of Person	
		Firm/Company	
	9825 NE 2nd Ave., Box #	531029	
		Address	
	Miami, Florida 33153		
	eric@hlmlegal.com	City/State and Zip Code	
	=	to be used for future annual report not	ification)
For further informatic	on concerning this matter, please c	all:	
Eric Hernandez		305 842-2101	
Nan	ne of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for	or 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)
<u>Mailing Add</u> Registratio		Street Address: Registration Sc	ction
•	f Corporations	Division of Cor	

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hernandez Lee Martinez, 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  $\frac{1/14/13}{}$ and assigned Florida document number 1.13000006331 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Hernandez Martinez, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LL.C." or the abbreviation "LL.C." 9825 NE 2nd Ave., Box 531029, Miami, FL 33153 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

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JAL Firm PA	3000 SW Third Ave., #501, Miami, FL 33129	□Add
			Remove
			□Change
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ote: If the date inserted in this	he date of filing:nust be specific and cannot be prior to date of block does not meet the applicable state. Department of State's records.	(optional) of filing or more than 90 days after filing tuttory filing requirements, this date	) Pursuant to 605,020
record specifies a delayed effective is filed.	tive date, but not an effective time, at	12:01 a.m. on the earlier of: (b) Th	e 90th day after the
July 9	2024		
	11/		
Eric Hernandez	Signature of a member or authorized re		

Filing Fee: \$25.00