

113000036957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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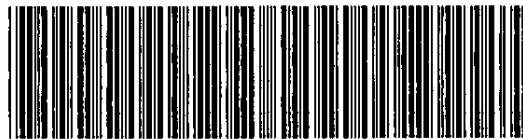
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D. SCOTT  
MAY 1 - 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 30, 2017

OMAR CRUZ  
3390 KAPOT TER  
MIRAMAR, FL 33025

SUBJECT: LA FAMILIA SERVICES LLC.  
Ref. Number: L13000036957

We have received your document for LA FAMILIA SERVICES LLC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 117A00006127

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

La Familia Services 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 March 11, 2013 and assigned  
Florida document number L13000036957.

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 contain 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)

3390 Kapot Ter.

Miramar FL 33025

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3390 Kapot Ter.

Miramar FL 33025

**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:

17650 NW 68 Ave., A1001

*Enter Florida street address*

Hialeah

*City*

Florida 33015

*Zip Code*

**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 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>    | <u>Address</u>   | <u>Type of Action</u>                   |
|--------------|----------------|------------------|---|
| MGR          | Alexandra Cruz | 3390 Kapot Ter.  | <input checked="" type="checkbox"/> Add |
|              |                | Miramar FL 33025 | <input type="checkbox"/> Remove         |
|              |                |                  | <input type="checkbox"/> Change         |
|              |                |                  | <input type="checkbox"/> Add            |
|              |                |                  | <input type="checkbox"/> Remove         |
|              |                |                  | <input type="checkbox"/> Change         |
|              |                |                  | <input type="checkbox"/> Add            |
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|              |                |                  | <input type="checkbox"/> Change         |

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 APR 28 2014  
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 TALLAHASSEE, FLORIDA

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Dated**

March 20, 2017.

Signature of a member or authorized representative of a member

Omar Cruz

CEO / Managing Member

Typed or printed name of signee

on the earlier of:  
 7  
 7  
 7  
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