

213000111531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

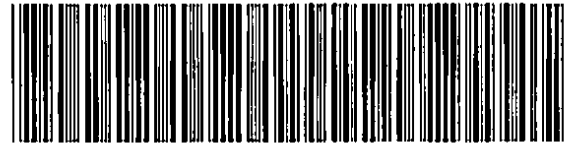
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
ALABAMA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SYB INTERNATIONAL CONSULTING LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAURA GARCIA PERA
Name of Person

SYBIC
Firm/Company

6601 SANTONA ST
Address

CORAL GABLES, FL 33146
City/State and Zip Code

laura.garciapera@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA GARCIA at () 786-468-9781
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|--|--|

Mailing Address:

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

Street Address:

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**

SYB INTERNATIONAL CONSULTING

(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 May, 2021 and assigned
Florida document number L13000111531.

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 "LLC."

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

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>
<u>MGR</u>	<u>LAURA GARCIA</u>	<u>6601 Santana St</u>	<input checked="" type="checkbox"/> Add
		<u>Coral Gables FL</u>	<input type="checkbox"/> Remove
		<u>33146</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Fernando J Prieto</u>	<u>260 Glenridge Rd</u>	<input checked="" type="checkbox"/> Add
		<u>Key Biscayne</u>	<input type="checkbox"/> Remove
		<u>FL 33146</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Gato Salvaje SL</u>	<u>260 Glendridge Rd</u>	<input type="checkbox"/> Add
		<u>Key Biscayne</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33146</u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Change
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2021 JUN -7 PM 8:05
TODAY'S DATE AND TIME

2021 JUN -7 PM 8:05

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **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 June 4th, 2021

Alma-Green

Signature of a member or authorized representative of a member

LAURA GARCIA

Typed or printed name of signee

Filing Fee: \$25.00