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08/30/21--01036--008 **60.00

Registration Section Division of Corporations TO:

	SORES LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	JUAN C. OBREGON		
		Name of Person	
	A & O ASESORES LLC		
		Firm/Company	<u> </u>
	2514 MONTCLAIRE CIRC	CLE	
		Address	
	WESTON/FLORIDA 3332	7	
		City/State and Zip Code	
	jcobregon@aoasesores.net		
	E-mail address: (t	o be used for future annual report notifie	ation)
For further information c	oncerning this matter, please ca	ill:	
JUAN C. OBREGON		954 2256033	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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)

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & O ASESORES 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 $\frac{10/29/2013}{2}$ and assigned Florida document number _____13000152425 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 regist agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 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 smending Authorized Person(s) authorized to manage, enter the title, name, and address of each person octog
or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	RAMON J. MORENO	4022 estepora N. Dura	JFL 3317X
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ective date, if other than the da n effective date is listed, the date must b	e specific and cannot b	e prior to date of	filing or more the	(option 90 days after	filing.) Pursuar	nt 10 605.0
te: If the date inserted in this block current's effective date on the Department.	t does not meet the i irtinent of State's re	applicable statu cords.	tory filing requ	nrements, this	date will not	be listed
ecord specifies a delayed effective of	ate, but not an effec	tive time, at 12	:01 a.m. on the	e earlier of: (b) The 90th d	ay after t
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Amendment to LLC Operating Agreement

for

A & O ASESORES L	LC - Reg No. L1300011524	25
A Limited Liability Company formed unde	er the laws of the State of	FLORIDA
We, the Members of A & O ASESORE day of ゴαレルリト	ES LLC_, hereby resolve a	
1. Section(s) SCHEDULE A of the cu	ırrent Operating Agreement	are amended to read:
List of Members, Membership Percentage Interests and	-	<u> </u>
Name, Address and Signature of Member -	mbership Interest (%) - Capita 100%	al Contribution 100%
2514 MONTCLAIRE CR, WESTON FL 33327		
2. All other sections of the attached Opera	ting Agreement remain in fu	ll force and effect.
The undersigned have duly executed this date first written above:	s amendment to the Opera	ating Agreement on th
Member:	Signature:	1
JUAN C. OBREGON		Alu s
RAMON J. MORENO		