

L14 0000 24769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

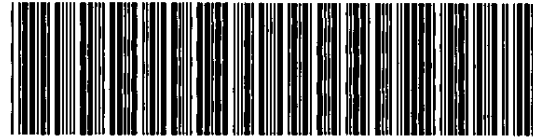
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500260359515

05/23/14--01006--016 **25.00

FILED
14 MAY 23 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L.A NETWORK 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:

Luis Angel Garcia Borges
Name of Person

LA NETWORK LLC
Firm/Company

7218 Southgate Blvd
Address

Tamarac FL 33321
City/State and Zip Code

yustrujillo@msn.com
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Angel Garcia Borges at (954) 918 2736
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

LA NETWORK 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 2/10/2014 and assigned Florida document number L14000024769

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 end with 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)

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

City

Florida

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



MGR = Manager
AMBR = Authorized Member

<u>MGR</u>	<u>YUSMARY Trujillo</u>	<u>7218 Southgate Blvd</u>	☒ Add
	<u>de la Rosa</u>	<u>Tamarac FL 33321</u>	☐ Remove

 Add

☐ Remove☐ Add☐ Remove☐ Add☐ Remove

☐ Add

☐ Remove☐ Add☐ Remove

TALLAHASSEE, FLORIDA

23 MAY 64

1. The first step is to identify the key components of the system. This involves understanding the hardware, software, and data involved in the process.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I just need add Yusmary Trujillo de la Rosa as
a manager together with myself.

Luis Angel Garcia Borges-MGR

Yusmary Trujillo de la Rosa-MGR

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)

Dated 5 / 19 / 2014 , _____

Signature of a member or authorized representative of a member

Luis Angel Garcia Borges

Typed or printed name of signer

Yusmary Trujillo de la Rosa

Page 3 of 3

Filing Fee: \$25.00

RECEIVED
14 MAY 23 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA