

L14 0000 56947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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M. MILLIGAN
EXAMINER

SEP - 8

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2016 SEP - 6 AM 8:37

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOLTECH SOLUTIONS 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:

OSVALDO MARTINEZ

Name of Person

O&J PROFESSIONAL SERVICES INC

Firm/Company

782 NW 42 AVE STE 433

Address

MIAMI FL 33126

City/State and Zip Code

OSVALDOEMARTINEZ@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OSVALDO MARTINEZ

305

446-4006

at ()

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**

SOLTECH SOLUTIONS 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 04/07/2014 and assigned
Florida document number L14000056947.

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:

782 NW 42 AVE STE 433

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33126

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>
MGR	Jimmy's Rivadeneira Alava	10885 NW 89 Terrace Ste 220	☐ Add
		Doral Fl 33178	☒ Remove
		10885 NW 89 Terrace Ste 220	☐ Change
MGR	Jimmy A. Rivadeneira	10885 NW 89 Terrace Ste 220	☐ Add
		Doral Fl 33178	☒ Remove
			☐ Change
MGR	Sandra M. Alava de Rivadeneira	10885 NW 89 Terrace Ste 220	☐ Add
		Doral Fl 33178	☒ Remove
			☐ Change
MGR	Jimmy's Alava Rivadeneira	10885 NW 89 Terrace Ste 220	☐ Add
		Doral Fl 33178	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

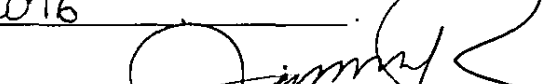
[illegible]

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

8-31-2016



Signature of a member or authorized representative of a member

Jimmy A. Rivadeneira Flor

Typed or printed name of signee

Filing Fee: \$25.00

2015 SEP -6 AM 8:31
 DEPT. OF STATE
 BILL ABRAHAMSON