## 1/400/35/47

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:		LLC ited Liability Company	
The enclosed Articles of A	omendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Camil	O Alzate Name of Person	
		Lian Company	
	11349 5. Ora	nge Blossantil.	#106
	Orland	O 11 32837 City/State and Zip Code	
	F-mail address: (	to be used for tuture annual report nou	lication)
For further information co	ncerning this matter, please ca	ull.	
Camlo	Alzale	at ( <u>40)</u> ) <u>(683 -</u> Area Code Daytim	4283 e Telephone Number
Innelosed is a check for the	following amount:		
<b>25.</b> \$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 Taffahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clinon Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Thereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am tamiliar 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. Thereby confirm that the limited liability company has been notified in writing of this change.

New Registered Agent's Signature, if changing Registered Agent:

H 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 ≃ A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
NGR	Edwin H. Reyes	2758. Michigan Ave #3	□ \dd
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tive date, if other than flective date is listed, the date . If the date inserted in th nent's effective date on th	e must be specific and his block does not n	I cannot be prior to neet the applicabl	date of filing or more	than 90 days after filir	ig FPursuai	n to 605 0 be listed
ecord specifies a dela se 90th day after the			an effective tim	e, at 12:01 a.m	on the	earlier
u July 5		2017	L			
			}			

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Filing Fee: \$25.00