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COVER LETTER

TO: Registration S Division of Co		•	•
INPALAC	CE LLC		<i>?</i>
SOBJECT.	Name of Lir	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ALVARO PATINO		
		Name of Person	
	HISPANIC FINANCIAL	TAX SERVICES INC	
		Firm/Company	
	7401 WILES RD, SUITE	126	
		Address	
	CORAL SPRINGS, FL 33	r of Limited Liability Company are submitted for filing. matter to the following: Name of Person	
,			
	apatino@hispanictaxine.co		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please e	all:	
ALVARO PATINO			
Name (of Person		e Telephone Number
Enclosed is a check for t	the following amount:		
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addre	<u>ss:</u>	Street Address:	

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

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

(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 O3/18/2015 Florida document number L15000052502 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: L'ARTE EVENTOS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abt 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)	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: L'ARTE EVENTOS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the able Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	and assigned
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. If amending the registered agent and/or registered office address on our records, enter the name	a of the new register
gent and/or the new registered office address here:	of the new register
Name of New Registered Agent:	
Mary Project and Office Address	
New Registered Office Address: Enter Florida street uddress	<u></u>
	Ziv 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	AIDA M. RODRIGUEZ GARCIA	851 SW 55TH AVE	F Add
		MARGATE, FL 33068	□ Remove
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<u>Note</u>	ffective date is listed, the da if the date inserted in te ment's effective date on	his block does	not meet the a	ipplicable statut	iling or more than s ory filing require	90 days after filing ements, this date	c.) Pursuant to 60 will not be lis	5.0207 () ted as th
the re	ecord specifies a de e 90th day after the	layed effecti e record is fi	ve date, bu led.	it not an effe	ective time, a	t 12:01 a.m.	on the earli	ier of:
Date	NOVEMBER 25)	2019					
Date	NELSON I. HOYO	-/	·· + /	//- /				
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Typed or printed name of signee

Filing Fee: \$25.00