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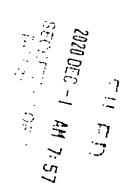
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Special Instructions to I	Filing Officer:	
		

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	Registration S Division of Co		
ud ie <i>c</i>		TERPRISES, LLC	
UBJEC	1: <u>. </u>	Name of Lim	ited Liability Company
he enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.
case ret	um all correspo	ondence concerning this matter	to the following:
		LUIS FORS, ESQ	
			Name of Person
		ATTORNEY AT LAW	
			Firm/Company
		12745 SW 34 Street	
			Address
		Miami, FL 33175	
		for all worth and	City/State and Zip Code
		forslaw@bellsouth.nct E-mail address: (to be used for future annual report notification)
r furth	er information o	concerning this matter, please ca	all:
is Fors	:		305 559-1948 at ()
	Name (Name of Person Area Code Daytime Telephone Number	
losed	is a check for t	he following amount:	
\$25.0	90 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration Division of C P.O. Box 632 Fallahassee,	Section Corporations 27	Street Address: 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 Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on our r Liability Company)	ecords.)	
he Articles of Organization for this Limited I orida document number L15000196089	Liability Company	were filed on November 19	9, 2015	and assigned
nis amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name	of the limited liab	oility company here:		
/A				
e new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbrev	riation "L.L.C."
nter new principal offices address, if applicable: 'rincipal office address MUST BE A STREET ADDRESS)		13202 SW 8th Street		
		Miami, FL 33184		
			 ເກ ຕາ	2020
nter new mailing address, if applicable:		13202 SW 8th Street	TALL AT	- 030 M
(ailing address MAY BE A POST OFFICE BOX)		Miami, FL 33184		
			ني. د د د	Ā ,
			1	7: 5
If amending the registered agent and/or ent and/or the new registered office address	•	address on our records, <u>e</u>	nter the name of	
Name of New Registered Agent:	ARELDIS MA	CHIN		
New Registered Office Address:	13202 SW 8th	Streer		
		Enter Florida street a	iddress	
	Miami		_, Florida <u>33184</u>	
		City		Zip Code

Registered Agent's Signature, if changing Registered Agent:

REINA ENTERPRISES, LLC

reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and 2pt the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 2pt filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability 2pany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

AGR = Manager AMBR = Authorized Member

<u>`itle</u>	<u>Name</u>	Address	Type of Action
иGRM ——	LUIS REINA	16120 SW 42nd Terrace	□Add
		Miamí. FL 33185	■Remove
			Change
IGRM	MARIA ISABEL REINA	16120 SW 42nd Terrace	
		Miami, FL 33185	■Remove
			□Change
GRM	ARELDIS MACHIN	13202 SW 8th Street	= Add
		Miami, FL 33184	□Remove
			☐ Change
			□Add
			П е точе
			□Change
			□Remove
			□ Change
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			ПRетоve
			□Change

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ctive date, if	ther than the dat	te of filing:			_ (optional)	
effective date is l	sted, the date must be:	specific and cannot does not meet the	applicable statu	iling or more than 90 of tory filing requirem	lays after filing.) Pur	suant to 605.0207 (not be listed as t
ord specifies a filed.	lelayed effective da	te, but not an effe	ective time, at 12	01 a.m. on the carli	er of: (b) The 90	th day after the
	, 2020	,	·			
November 2	·					
November 2	~	<u></u>				
November 2		nature of a member	or authorized rece	esentative of a membe	r	
		nature of a member	or authorized repr	esentative of a member	r	

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Filing Fee: \$25.00