## LICOCOOPOIZ

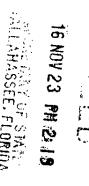
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	Registration Se Division of Cor					
CLID IEC	SOUTHER	N APPLIANCES & REPAIRS	LLC			
SUBJEC	: I:	Name of Lim	ited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please re	turn all correspon	ndence concerning this matter	to the following:			
		JUAN JUGO				
			Name of Person	<del></del>		
		SOUTHERN APPLIANCE	ES & REPAIRS LLC			
Firm/Company						
		3063 W 80th Street				
		Address				
		Hialeah Florida 33018				
		City/State and Zip Code				
		juanjugor@gmail.com				
		E-mail address: (	to be used for future annual report notifi	cation)		
For furth	er information co	oncerning this matter, please ca	all:			
JUAN JU	JGO		786 202 9262 at ()			
	Name of	f Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	ne following amount:				
\$25.0	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

SOUTHERN APPLIANCES & REPA		
(Name of the Limited )	Llability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	ility Company were filed on 1/13/2016	and assigned
Florida document number L16000009012	<del></del> '	
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation	viation "L.L.C."
Enter new principal offices address, if applicabl	le:	· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET A	ADDRESS)	
F1		TO
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		77
		5
	registered office address on our records, enter the	mame of the new
registered agent and/or the new registered offic	e address here:	S
		The same of the sa
Name of New Registered Agent:	». •	9 7 17
New Registered Office Address:		
	Enter Florida street address	<del></del>
	, Florida	
·	City	Zin 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>	Type of Action
MGR	MONTEFUSCO, MARCO	3063 W 80th Street	□ Add
		Hialeah Florida 33018	<b>■</b> Remove
			Change
MGR	JUAN JUGO	3063 W 80th Street	<b>l</b> ✓ Add
		Hialeah Florida 33018	☐ Remove
		<u> </u>	
			Add
			Remove  AHASSEE FLORIDA  Remove
			☐ Change
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ective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of ite:  If the date inserted in this block does not meet the applicable statucument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Pursu	ant to 60 ot be lis	5.0207 ted as
record specifies a delayed effective date, but not an effective date, but not an effective date, but not an effective date.	ective time, at 12:01 a.m. on th	e earl	ier o
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00