

L160000009032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500301859825

07/31/17--01037--013 \*\*25.00

FILED  
2017 JUL 31 PM 2:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
AUG - 3 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Innoveco 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:

Mariano Llorian	Name of Person
Innovco LLC	Firm/Company
253 NE 2nd Street APT 3908	Address
Miami, FL, 33132	City/State and Zip Code
mariano.llorian@advantaclean.com	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mariano Llorian	at ( )	3057138337
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

ML

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Innoveco LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2017 JUL 31 PM 2:53  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/13/2016 and assigned  
Florida document number L16000009032.

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:

**(Principal office address MUST BE A STREET ADDRESS)**

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**

ML

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	DI FABIO, MAXIMILIANO J	253 NE 2nd Street, APT 3908	<input type="checkbox"/> Add
		Miami, FL 33132	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DI FABIO, GISELA I	253 NE 2nd Street, APT 3908	<input checked="" type="checkbox"/> Add
		Miami, FL 33132	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2017 JUL 31 PM 2:53  
FILED  
CLERK OF DISTRICT COURT  
DADE COUNTY, FLORIDA

ML

2011 JUL 31  
SEATTLE  
WASHINGTON STATE

FILED  
JUL 31 PM 2:53  
RECEIVED  
FBI - MEMPHIS  
JUL 31 1968

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 7/21/2017

Signature of a member or authorized representative of a member

Mariano Llorian

Typed or printed name of signee

ML

Innoveco LLC

Office Address: 236 NE 33<sup>rd</sup> Street, Oakland Park, 33334, FL

Mailing Address: 253 NE 2<sup>nd</sup> Street APT 3908, Miami, 33132, FL

Tel: 754.218.8070



7/21/2017

To: Florida Department of State

Re: Business Management Structure

I, Mariano Llorian, hereby state the documentation filled to Remove Maximiliano Jose Di Fabio as Manager of Innoveco LLC and the addition of Gisela Ivana Di Fabio as Manager.

If you need additional information, please contact me on my mobile phone (305).713.8337 or my email address: [mariano.llorian@advantaclean.com](mailto:mariano.llorian@advantaclean.com)

The mailing address to return the amendment filed is 253 NE 2nd Street APT 3908, Miami, 33132, FL

Sincerely,

A handwritten signature in black ink, appearing to read "Mariano Llorian", is written over a horizontal dashed line.

Mariano Llorian

Manager Innoveco LLC