## 116000018242

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Duain and Cabiba Nama)
(Business Entity Name)
(Document Number)
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96/14/24--01011--010 #25.00

6/26/24



## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

SUBJECT:	NORTH AMERICAN	LLC					
30b3fxC1.	Name of Lim	ited Liability Company					
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
	os	VALDO MARTINEZ					
		Name of Person	<del></del>				
	O&J PR	OFESSIONAL SERVICES INC					
	· <del></del>	Firm/Company					
	I	3550 SW 88 ST STE 150					
		Address					
		MIAMI FL 33186					
		City/State and Zip Code					
	OSVALD	OEMARTINEZ@AOL.COM					
	E-mail address: (	to be used for future annual report not	ification)				
For further information co	oncerning this matter, please c	all:					
OSVALDO M	ARTINEZ	305 446-4006 at ()					
Name of	Person	Area Code Daytin	ne Telephone Number				
Enclosed is a check for th	e following amount:						
■ \$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 S Division of Co P.O. Box 632	ection orporations	Street Address: Registration Se Division of Co The Centre of	rporations				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NORTH AMERICA	N LLC	
(Name of the Lim	ited Liability Company a (A Florida Limited Liabi	s it now appears on our records.) lity Company)	<del></del>
The Articles of Organization for this Limited I lorida document number L16000018242	Liability Company wer	re filed on 01/26/2016	and assigned
his amendment is submitted to amend the fol	llowing:		
a. If amending name, enter the new name	of the limited liability	company here:	
he new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC" of	or the abbreviation "L.L.C."
Inter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u> </u>		
3. If amending the registered agent and/or igent and/or the new registered office addre		ess on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		OSVALDO MARTINEZ	
New Registered Office Address:		13550 SW 88 ST STE 150	
		Enter Florida street address	
	МІАМІ		ida <u>33186</u>
		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

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>	Address	Type of Action
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		<del></del>	□Remove
			□ Change
			□Add
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