

L16 00000 36665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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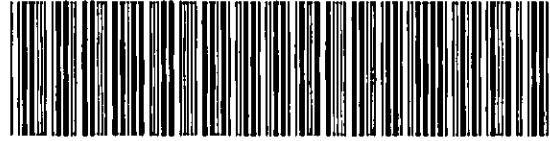
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WOPU 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:

JESUS LEON

Name of Person

SACONSA GROUP LLC

Firm/Company

7950NW 53RD STREET SUITE 337

Address

MIAMI FL 33166

City/State and Zip Code

JESUS@TAXTEAMM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS LEON

917 9466502
at ()
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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

WOPU LLC

(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 02/22/2016 and assigned
Florida document number L16000036665.

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1824 Victoria Pointe Circle,

Weston FL, 33327, USA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1824 Victoria Pointe Circle,

Weston FL, 33327, USA

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: SACONSA GROUP LLC

New Registered Office Address: 7950NW 53RD STREET SUITE 337

Enter Florida street address

MIAMI, Florida 33166

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

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

IGR = Manager
MBR = Authorized Member

<u>title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	HERNANDEZ GARCIA, ANA P	1946 CYGNUS CT	<input type="checkbox"/> Add
		WESTON, FL 33327	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Galarza, Jesus E	1824 Victoria Pointe Circle,	<input checked="" type="checkbox"/> Add
		Weston FL, 33327, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Briceno Pardo, Jose A	412 Fairmont Lane,	<input checked="" type="checkbox"/> Add
		Weston FL, 33326, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Rodriguez Martinez, Norman	1946 Cygnus Court	<input checked="" type="checkbox"/> Add
		Weston FL, 33327, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alvarez, Horacio	10780 NW 74th Lane,	<input checked="" type="checkbox"/> Add
		Doral FL, 33178, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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	Homez Albrecht, Carlos E	961 Tanglewood Circle	<input checked="" type="checkbox"/> Add
		WESTON, FL 33327, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lopez Hernandez, Dashiell O	19116 North Gardenia Avenue	<input checked="" type="checkbox"/> Add
		Weston FL, 33327, USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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 JUNE, 03, 2019

Signature of a member

Signature of a member or authorized representative of a member

Rodriguez Martinez, Norman

Typed or printed name of signee