L16 000 143310

(Requestor's Name)		
(Address)		
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ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION JUN 21 AM 11: 59

SECRETARY OF STATE
TALL ABASSES FOR STATE

The Bond 19	08, LLC	PALLAMASS:	
(<u>Name of the Limite</u> (d Liability Company as it A Florida Limited Liability	now appears on our records.) Company)	
he Articles of Organization for this Limited Lia	ability Company were fi	led on 8/03/2016	and assigned
lorida document number <u>L16000143310</u>	·		_
his amendment is submitted to amend the follo	wing:		
If amending name, enter the new name of	the limited liability co	mpany here:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Com	pany," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applica	ble:		
Principal office address MUST BE A STREET	ADDRESS)		
		·- ··	
nter new mailing address, if applicable:			_
Mailing address MAY BE A POST OFFICE B	(OX)		
 If amending the registered agent and/or re gent and/or the new registered office address 		on our records, enter the na	me of the new regist
Name of New Registered Agent:			
New Registered Office Address:	3676 SW 2n	d Street, 2nd Floor Enter Florida street address	
	Miami	, Florida _	33135
	City	<u> </u>	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 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
MGR_	Oscar Pozada	5001 SW 20th ST # 4203	🗆 Add
		Ocala, FL 34474	□Remove
		 	Change
<u>AMBR</u>	Judith Carolina Cardenas R	tod <u>riguez 5001SW 20th ST # 4203</u>	DAdd
		Ocala, FL 34474	□Remove
			□Change
			DAdd
			□Remove
		 	□Change
<u></u>			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (In 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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated June 15 , 2022 Signature of a member or authorized representative of a member
Signature of a member
Oscar Pozada Typed or printed name of signee

Filing Fee: \$25.00