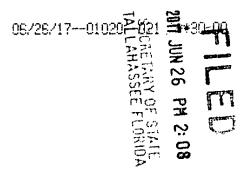
116000198898

(Re	questor's Name)	······
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(City	//State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



400300266744



J. HARRIS

COVER LETTER

TO: Registration Se Division of Co		
PALMARI SUBJECT:	RES ENTERPRISES, LLC	
SUBJECT.	Name of Limited Liability Company	
	of Amendment and fee(s) are submitted for filing.	
	LUIS ZAYAS	
	Name of Person	
	PALMARES ENTERPRISES, LLC	
•	Firm/Company	
	1631 SW 13TH ST	
	Address	
	MIAMI, FL 33145	
	City/State and Zip Code PALMARESENTERPRISES@GMAIL.COM	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
LUIS ZAYAS	305 6322024	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status	tus &

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

PALMARES ENTERPRISES, LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L16000198898	Company were filed on 10/27/2016 and assigned and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limi	ited liability company here:
N/A	•
he new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
Principal office address MUST BE A STREET ADDR	RESS)
	> 등 등
Enter new mailing address, if applicable:	N/A N/A
Mailing address MAY BE A POST OFFICE BOX)	TO STATE OF THE PARTY OF THE PA
	- CS ?: C
3. If amending the registered agent and/or regis registered agent and/or the new registered office add	stered office address on our records, enter the name of the n
Name of New Registered Agent: N/A	
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

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	Valeria Galeano	1631 sw 13th street	⊟ Add			
		Miami, Fl 33145	Remove			
			Change			
AMBR	Pekasa Racing, IIc	2460 sw 23 st				
		Miami, Fl 33145	□ Remove			
			□ Change			
			Remove			
			Change			
			TALLAH DINAYE			
			Character 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
			□ Remove			
			□ Change			
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,			Remove			
			□ Change			

N/A	•						
							
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		N/A			(4!I)		
fective date, if other than effective date is listed, the date	ate must be specific ar	nd cannot be prio	r to date of filing	or more than 90 day	(optional) ys after filing.) l	Pursuant to	605.02
ote: If the date inserted in ocument's effective date on	this block does not	meet the application	cable statutory f	iling requiremen	ts, this date w	ill not be	listed
ediment's effective date off	the Department of	State 5 records	•				
record specifies a de	laved effective	date but n	nt an effectiv	e time at 12	·01 a m o	n the e	arlier
The 90th day after the	e record is filed	l.	Je all citocut	c inner at 12	.01 0		
JUNE 15TH		2017				TAL	28
			5			:CR	
	يمنيد.		=-			至二	_⊊
	Signature of	a member or autl	norized representa	ntive of a member		3SS Aut	JUN 26
LUIS ZAYAS						بير <u>بر</u> بيات	PH
EOIO MATINO							

Page 3 of 3

Filing Fee: \$25.00