

L170000035263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

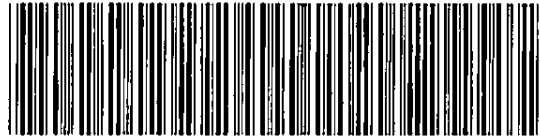
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/14/23

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHANGE IS GOOD 2016 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:

RAMON GUZMELIZ

Name of Person

CHANGE IS GOOD 2016 LLC

Firm/Company

20223 SW 85TH PL.

Address

CUTLER BAY, FL 33189

City/State and Zip Code

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

For further information concerning this matter, please call:

RAMON GUZMELIZ

Name of Person

at (786) 451-1089

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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CHANGE IS GOOD 2016 LLC

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>	<u>Address</u>	<u>Type of Action</u>
MGR	JOSE DANIEL ALVAREZ GUZMÁN	20223 SW 85TH PL.	<input checked="" type="checkbox"/> Add
		CUTLER BAY, FL 33189	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALEX DIAZ DIAZ	15280 SW 91ST LN	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33196	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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 (3)(b)

Dated OCTOBER 29, 2023

Signature of a member or authorized rep

Signature of a member or authorized representative of a member

RAMON GUZMELIZ AGUILAR

Typed or printed name of signee