L17000044045

(Re	questor's Name)	
(Ād	dress)	
(Ad	dress)	· · · · · ·
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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A. BUTLER JAN 28 2022

COVER LETTER

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

ESMERALI	DA BODAS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	JOSE ALEJANDRO GON	VZALEZ	
		Name of Person	
	ESMERALDA BODAS L	LC	### Proposition Proposition #### Proposition Proposition ###################################
		Firm/Company	
	201 SW 17TH RD #405		
	-	Address	
	MIAMI, FL 33165		
		City/State and Zip Code	
	urbanstudio2012@gmail.co		
	E-mail address: (to be used for future annual report not	ification)
For further information co	ncerning this matter, please co	all:	
Jose Alejandro Gonzalez		786 6241856	
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Address Registration So		<u>Street Address;</u> Registration Se	ection
Division of Co			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESMERALDA BODAS LLC			.
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) ompany)	
The Articles of Organization for this Limited L lorida document number L17000044045	Liability Company were file	ed on 02/24/2017 · · · · · ·	and assigned
his amendment is submitted to amend the fol	lowing:		
a. If amending name, enter the new name of	of the limited liability com	pany here:	
he new name must be distinguishable and contain the	words "Limited Liability Compa	ny," the designation "LLC" or the	ne abbreviation "L.L.C."
enter new principal offices address, if appli	cable:		<u> </u>
Principal office address MUST BE A STRE	ET ADDRESS)		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	(BOX)		
3. If amending the registered agent and/or		on our records, enter the	name of the new register
gent and/or the new registered office addre	<u>ess here</u> :		
Name of New Registered Agent:	CRISTOBAL GONZAL	EZ	
New Registered Office Address:	7540 NW 114TH PL		
		Enter Florida street address	
	DORAL	, Florida	33178
	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:

MCP = Manager

MGK =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOSE M. GONZALEZ PALMA	578 83RD STREET #1R . BROOKLYN	≣ Add
		NY. 11209	□Remove
			□Change
MGR	MONICA CAIBET	201 SW 17TH RD #405	≣Add
	MIAMI, FL 33129	MIAMI, FL 33129	□Remove
			□Change
			□ Remove
			□Change
			□Add
			□Remove
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			□ Add
			□Remove
			□ Change

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an eff <u>ote:</u>	ive date, if other than the date of filing:
ecor is fil	d 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 led.
ated	01/17/2022
ucu	- JAMP
	Signature of a supplied by the supplied of the supplied by the
	Signature of a member of authorized representative of a member

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