(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600342769436

04/03/20--01007--028 \*\*25.00

APR 1 7 2020 S. YOUNG

## **COVER LETTER**

TO:

	LLC		
SUBJECT:	Name of Limi	ted Liability Company	<del></del>
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Sofia Powell-Cosio		
Name of Person    Sofia Powell-Cosio P.A.			
	Sofia Powell-Cosio P.A.		
		Firm/Company	<del></del>
	1200 Brickell Avenue, Sui	te 520	Ephone Number  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  n ations thassee treet, Suite 810
		Address	
	Miami, Florida 33131		
	Division of Corporations  GUUAO LLC  CT: Name of Limited Liability Company  losed Articles of Amendment and fee(s) are submitted for filing.  eturn all correspondence concerning this matter to the following:  Sofia Powell-Cosio  Name of Person  Sofia Powell-Cosio P.A.  Firm/Company  1200 Brickell Avenue, Suite 520  Address  Miami, Florida 33131  City/State and Zip Code  F-mail address: (to be used for future annual report notification)  ther information concerning this matter, please call:  Powell-Cosio  Name of Person  Name of Person  To get in a check for the following amount:  5.00 Filing Fee Solution Solutions (Certificat Copy Certificat Copy (additional copy is enclosed)  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  2415 N. Monroe Street, Suite S	<u>.</u>	
	E-mail address: (	to be used for future annual report notification)	
For further informatio	n concerning this matter, please c	all:	
Soña Powell-Cosio			
Nam	e of Person		Number
Enclosed is a check for	r the following amount:		
S25.00 Filing Fee		Certified Copy (additional copy is enclosed)	Certificate of Status & - Certified Copy
Registration Division of P.O. Box (	on Section f Corporations 3327	Registration Section Division of Corporations The Centre of Tallahasse	ee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GUUAO LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>より700の448の7</u>	were filed on February 24, 2017 and assigned
lorida document number \( \frac{L}{7}\) OOOOHTBOT.  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 "LLC" or the abbreviation \( \frac{R}{R}\) LC.  Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered.	
A. If amending name, enter the new name of the limited liab	ility company here:
	28
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation P.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Juan Carlos Leiros Pampinella	1200 Brickell Avenue, Suite 520	
		Miami, Florida 33131	□Remove
			El Change
			□ Remove
			□Change
			□Remove
			[]Change
			□ Add
			Remove
			Change
<del></del>			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change

				· · · · · · · · · · · · · · · · · · ·	
					-
			·····		_
					_
		, <del></del> -			_
					_
					_
				<del></del>	<del></del>
	·				_
so				(antianal)	
nte: If the date inso	ner than the date of flued the date must be specific a cried in this block does not date on the Department of	t incer the applicable:	e of filing or more than 90 statutory filing requires	(optional) I days after filing.) Pursuant to nents, this date will not be	605.026 listed :
record specifies a do is filed.	dayed effective date, but n	not an effective time, a	t 12:01 a.m. on the ear	lier of: (b) The 90th day :	ntier th
is inco.					
ated <u>3.25</u> -	-i	2020			
aicu <u>" ~ ~ ~ ~                             </u>	<del></del>				
. <del>.</del>		<del></del>	representative of a men	L.	