L17000050070

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JIVISION OF CORPORATION

22 APR 13 PN 1+15

T. MATTHEWS MAY - 4 2022

Division of Cor	porations	.1	v
OPTIMAX	INTERNATIONAL CONSU	LTING, ILC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	ESTHER ZELEDON		
		Name of Person	
	OPTIMAX INTERNATIO	ONAL CONSULTING, LLC	
		Firm/Company	
	10651 SW 113 PLACE, A	PT A	
		Address	
	MIAMI, FL 33176		
		City/State and Zip Code	
	riveraecon@gmail.com		
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Paul Rivera		805 635-7214	
Name o	f Person		e Telephone Number
Enclosed is a check for the	ne 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 S		Street Address: Registration Se	ection
Division of C	•	Division of Co	•
P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monro	Pallahassee Se Street, Suite 810

Tallahassee, FL 32303

TO: Registration Section

IU JIVISION OF CORPORATIONS ARTICLES OF ORGANIZATION FILES

OPTIMAX INTERNATIONAL CONSULTING, LLC

22 APR 13 PH 1: 15

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com Florida document number L17000050070	npany were filed on MARCH 3, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
agent and of the new registered office address here.	
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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
PRES	ESTHER ZELEDON	10651 SW 113 PLACE, APT A	□Add
		MIAMI, FL 33176	□ Reтюуе
VP	PAUL RIVERA	10651 SW 113 PLACE, APT A	⊡Add
		MIAMI, FL 33176	□Remove
		- -	∃ Change
	<u> </u>		Add
			□Remove
			□Change
			□ Add
			□Remove
			□Add
			ПСПюче
			□Change
			□Add
			□Remove
			∏Channa

PRESIDENT AND	TO CHANGE PAUL RIVERA FROM CURRENT ROLE AS PRESIDENT TO VP.
NO FURTHER AM	ENDMENTS.
	
Note: If the date inserted	than the date of filing:
the record specifies a delayed cord is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated APRIL 5	2022
	

Typed or printed name of signee