Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HISPANUSA INC Account Number : 120070000099 Phone : (954)478-2706 Fax Number : (954)934-0334

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

OCORO SERVICES LLC

Certificate of Status	0
Certified Copy	0
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COVER LETTER

TO:	Registration Se Division of Cor			
Cupir		ERVICES LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		CARLOS OCORO		
			Name of Person	···
		MGR		
			Firm/Company	
		9101 W SAMPLE RD AP		
		500 LT 0000156	Address	
		CORAL SPRINGS	City/State and Zip Code	
		INFO@HISPANUSA.COM	•	
			to be used for future annual report notif	ication)
For furt	her information o	oncerning this matter, please of	all:	
CARL	OS OCORO		954 501-9094 at ()	
	Name o	f Person	Area Code Daytimo	Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$25	5.00 Filing Fee	S30.00 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 Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'aliahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The so

Zip Code

OCORO SERVICES LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
he Articles of Organization for this Limited Liability Company were filed on 03/24/2017 and assigned
lorida document number L17000067382
his amendment is submitted to amend the following:
. If amending name, enter the new name of the limited liability company here:
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
nter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
i. If amending the registered agent and/or registered office address on our records, enter the name of the new registe gent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
Dia

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.

City

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

Title	Name	Address	Type of Action
AMBR	ALVARO BAENA	9101 W SAMPLE RD APT 502	□ Add
		CORAL SPRINGS FL 33065	■Remove
			□Change
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u ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing: cotive 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
recor d is fi	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 ed.
Dated	JULY 21 , 2020
	Signature of a member or authorized representative of a member
	CARLOS OCORO

Filing Fee: \$25.00