# L170000 78398

(Requestor's Name)
(Address)
(Madiess)
(Address)
(6) (6) (7) (9)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Estitu Neme)
(Business Entity Name)
(Document Number)
Outline to a state of Ohite
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ling Officer.

Office Use Only



300314940473

08/25/19--01036--023 \*\*25.00

18 JUN 25 PM 1: 1

SECRETARY OF STATE DIVISION OF CORPORATION

N COOPER JUN 2 7 2018

## **COVER LETTER**

TO: Registration So Division of Cor			
SUBJECT: When	re Locals Go	Events LLC	
SUBJECT: Where Locals Go Events 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:  Luan Marcos Rancano Name of Person  Firm-Company  51 SW 11 <sup>th</sup> Street # 721  Address  Miami FL 33130  EigyState and Zip Code  Juanmarcos Rancano at (780) 389-1092  Name of Person  For further information concerning this matter, please call:  Luan Marcos Rancano at (780) 389-1092  Name of Person  Name of Person			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u> </u>	WCOS Rancano Name of Person	
		Firm/Company	
	51 SW 11#	Street #72	<b></b>
	JUUNMAY (0 E-mail address: (0	Sa ranc creative	(OYY)
For further information c	oncerning this matter, please ca	II:	
<u>Juun</u>	lar (OS Rancar	10 at (780) 389 - Area Code Daytime	: Telephone Number
Enclosed is a check for the	he 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Where Locals (Name of the Limited Liability Compa (A Florida Limited L	Go Events  In as it now appears on our records.)  Clability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000078398</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	51 SW 11th Street #721
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33130
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, <u>enter the name of the new</u> <u>e</u> :
Name of New Registered Agent: <u>UUUN</u>	Marcos Rancano
New Registered Office Address: 51 SW	/ 11th Stylet # 721  Enter Florida street address
Miami	. Florida 33130 Cuy 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

Page 1 of 3

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>	Name	Address	Type of Action
AMBR	duan M. Rancano	51 SW 11th Street 777	21_ <b>b</b> /Add
		Miami FL 33130	□ Remove
		1818 SW 15+ Ave. #180	03 □ Change
AMBR	Antar Sosa	Miami FL, 33129	<b>jX</b> Add
			□ Remove
			Change
AMBK	Stephanie Angiely Ardila	21251 San Simeon W	M 🗆 Vqq
	Ardila	Apt. 304 N. Miami Beach	Remove
		FL 33179	<b>C</b> hange
			□ Remove
			Change
			Remove
			Change
			🗆 Remove
			□ Change

	<del></del>		<del></del>	0-=	·	
		<u> </u>				
<u></u>						_⊕
		_			<b>19</b>	SEARG
					<u> </u>	
					25	
			<del>.</del>			CORPO.
						18.480°
				_	#37	HOK:
	~					
ective date, if other that	r the date of fili	na·		(optio	nal)	
effective date is listed, the date:  If the date inserted in the	le must be specific a	ind cannot be prior t	to date of filing or m	ore than 90 days after f	filing.) Pursuant to	605.020
ument's effective date on t			iole statutory min	g requirements, uns	date will not be	iisicu i
record specifies a del he 90th day after the			an effective t	ime, at 12:01 a.	.m. on the ea	arlier (
ne som day area ene	record is mee					
ed June 13		2018	. /			
		1/1/1				
	Signature of	member or autho	rized representative	of a member		_
			1 1			

Page 3 of 3

Filing Fee: \$25.00