117000083036

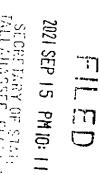
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/2)p/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700373165477

09/15/21--01017--001 *#50.00



COVER LETTER

Tallahassee, FL 32314

TO: 1	Registration S Division of Co	ection rporations	
SUBJEC	Deiuna 51.	21 LLC	
		Name of Lin	nited Liability Company
The engle	wed Articles of	C A mondayant and for (c)	
		Amendment and fee(s) are sul- ondence concerning this matter	
. 10430 100	mm an corresp	onderice concerning this maner	r to the following:
		Susan Jewell	
			Name of Person
		Wedge Associates LLC	
			Firm/Company
		12180 South Shore Blvd.,	Suite 101A
			Adáress
		Wellington, FL 33414	
			City/State and Zip Code
		admin@wedgeassociates.co	to be used for future annual report notification)
For further	r information o	oncerning this matter, please c.	
Susan Jew	ell		561 227-1555
	Name o	f Person	at () Area Code Daytime Telephone Number
_		e following amount:	
≡ \$25.0 0) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	lailing Addres		Street Address:
	egistration S ivision of C		Registration Section
	O. Box 632		Division of Corporations The Centre of Tollohouses

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2021 SEP 15 PM 10: 11

Deluna 5121 LLC

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

SECRETARY OF STATE FALLAHASSEE, FLORE

The Articles of Organization for this Limited Liability C		04.12.2017	and assigned
Florida document number L17000083036	 .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," th	e designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	, ,	-	<u>-</u>
(Principal office address MUST BE A STREET ADDR	ESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	office address on our	records, <u>enter th</u>	e name of the new registered
New Registered Office Address:	Fue II	t	A Parent
	nt: SS: Enter Florida street address Florida		
	City	, Flori	da
New Registered Agent's Signature, if changing Registered			sup Come
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered agbeing filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in thi, mplete performance o ent as provided for in	of my duties, and . Chapter 605, F.S	I am familiar with and S. Or, if this document is
	If Changing Registered /	Agent, Signature of N	ew 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Arenas, Enrique	5121 Las Paimas Avenue	□Add
		Wellington, FL 33414	
AMBR	Energy Holding Corp.		□Change
	outing rooms corp.	Federico Boyd Ave. No. 18 and 51st Street	= Add
		Republic of Panama	Петоче
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
···			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

•		
-		
-		
•		
-		
-		
-		
-		
~		
Note:	ve date, if other than the date of filing:	207 as
he record ord is file	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	he
Dated _	angust 17 2021	
	Signature of a member of authorized representative of a member	
	FOCIO Agui, lar Marager Typed or printed name of signee	

Filing Fee: \$25.00