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(Re	equestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE		CUADREDO, LLC			
SCESE		Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		Francisco Pifano			
		- , 	Name of Person		
		Pilito & Cuadredo, LLC			
			Firm/Company		
		3552 W 88 Terrace			
			Address		
		Hialeah, FL 33018			
			City/State and Zip Code		
		francisco@pifano.com	to be used for future annual report notif	fication)	
For furth	ner information co	oncerning this matter, please c	•	,	_
	co Pifano	, , , , , , , , , , , , , , , , , , ,	305 6806532 at ()		TSTOM E T
	Name of	f Person	Area Code Daytime	e Telephone Number	N 15 M
Enclose	d is a check for th	e following amount:			FEG
\$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILITO & CUADREDO, LLC		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	ility Company were filed on April 24, 2017	and assigned
Florida document number L17000089670	·	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
he new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
Principal office address MUST BE A STREET	ADDRESS)	····
Inter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u></u>	
		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
		五彩
	registered office address on our records, ent	er the name of the n
egistered agent and/or the new registered offic	<u>e address here</u> :	经 分
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		25
	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, 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
AP	Yovanny Suarez		🗆 Add
		3552 W 88 Terrace, Hialeah FL 331	■ Remove
			☐ Change
AP	Francisco Pifano		□ Add
		3552 W 88 Terrace, Hialeah FL 331	■ Remove
			☐ Change
MGR	Francisco Pifano	3552 W 88 Terrace, Hialeah FL 33	■ Add
			□ Remove
		 .	Change
			☐ Remove
		***************************************	☐ Change
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			☐ Change

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effective date is lis	ted, the date must be serted in this block	specific and	cannot be pri	or to date of filin	g or more than 9	0 days after filing	.) Pursuant to 605.02
	date on the Depar				, iiiiig require	ments, mis date	至可 置
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ne 90th day a	fter the record	is filed.					三型沙星
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ed May 12	<u> </u>	. I IIYI	2017				\$ m
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	Sign	atury of	nember or au	horized represer	ntative of a mem	ber	

Page 3 of 3

Filing Fee: \$25.00