

# L17000112735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

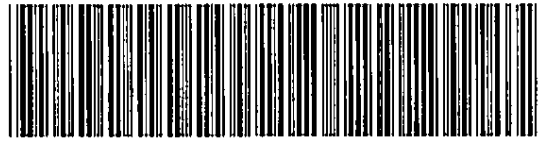
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 JAN -3 AM 9:10  
CALIFORNIA SECRETARY OF STATE

END

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Duality Alliance 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:

Miguel A. Bolivar  
\_\_\_\_\_  
Name of Person

The Duality Alliance LLC  
\_\_\_\_\_  
Firm/Company

15501 Southwest 27th Street  
\_\_\_\_\_  
Address

Miami, FL 33185  
\_\_\_\_\_  
City/State and Zip Code

mbolivar@thedualityalliance.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miguel A. Bolivar  
\_\_\_\_\_  
Name of Person

786 587-8653  
at ( )  
Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2023 JAN 3 AM 9:11  
STATION DEPARTMENT  
770

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

The Duality Alliance LLC

(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 Company were filed on May 22, 2017 and assigned  
Florida document number L17000112735.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

15501 SW 27th Street, Miami, FL 33185

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

15501 SW 27th Street, Miami, FL 33185

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

15501 SW 27th Street

*Enter Florida street address*

Miami

Florida

33185

*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**

Title	Name	Address	Type of Action
MGR	Jorge A. Bonilla	24943 SW 118 Place, Homestead, FL 33032	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Change Business Address from 24943 SW 118 Place, Homestead, FL 33032

Change Business Address to 15501 SW 27th Street, Miami, FL 33185

2023 JAN 11  
ALL CO. 11  
FALL CO. 11  
FALL CO. 11

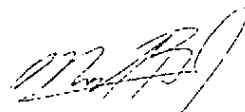
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(If an effective 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 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated January 3, 2023



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Miguel A. Bolivar

\_\_\_\_\_  
Typed or printed name of signee