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UBJEC	, ; <u></u>	Name of Limi	ited Liability Compan	у	
he encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
lease re	turn all correspo	ondence concerning this matter	to the following:	1	
		SANTANA, CARO I			
			Name of Perso	n	
			Firm/Compan	y	
		4913 TERRAPIN BLVD			
			Address		
		SAINT CLOUD, FL 3477			
		realtorcarosantana@gmail.c	City/State and Zip	Code	
		E-mail address: ()	to be used for future a	nnual report noti	fication)
or furth	er information	concerning this matter, please ca	all:		
CARO I SANTANA PAGAN		407 at (6556563		
	Name	of Person	Area Code	Daytim	e Telephone Number
Enclosed	d is a check for t	the following amount:			
■ \$ 25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Certified Co (additional copy	py'	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regisi Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	Reg Div Cli 260	REET/COURI gistration Section vision of Corporation Building of Executive Celahassee, FL 32	rations enter Circle

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

as it now appears on our records.)	
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06/08/2017	,
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v company here:	
Company." the designation "LLC" or the	abbreviation "L.L.C."
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e address on our records, ent	er the name of the
 	753 W
Enter Florida street address	3 3
W1 * 1	9.4 7
	To Zintala
	Company," the designation "LLC" or the

New Registered Agent's Signature, if changing Registered Agent:

thereby 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

GR = M MBR = A	lanager uthorized Member		
<u>tle</u>	<u>Name</u>	<u>Address</u>	Type of Action
GRM	JAIME GARCIA RABELL	4913 TERRAPIN BVLD	
		SAINT CLOUD FL 34771	Remove
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tive date, if other than the date of factive date is listed, the date must be specifild the date inserted in this block does ment's effective date on the Department cord specifies a delayed effective 90th day after the record is fill	c and cunnot be prior to date not meet the applicable st of State's records.	atutory filing requirements, this date v	vill not be lis
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JULY 26			
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Cano O Do	of a member or authorized r	epresentative of a member	
Caro () Signature CARO I SANTANA PAGAN	of a member or authorized of a member of authorized of Typed or printed name		

Filing Fee: \$25.00