

L17000140027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

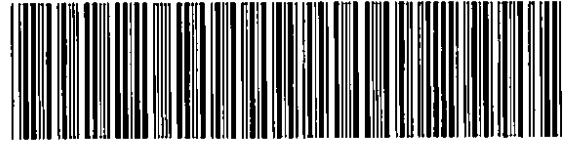
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
18 FEB 21 PM 12:07
FEB 21 2018
FEB 21 2018

J. LEGGETT
FEB 22 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Denisse Diaz 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:

Norys Diaz-Rodriguez

Name of Person

Denisse Diaz LLC.

Firm/Company

3830 s.w. 104 court

Address

Miami, FL 33165

City/State and Zip Code

denissediaz@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denisse Diaz

at (**305**) **218-2282**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Denisse Diaz LLC.

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

6/28/17

The Articles of Organization for this Limited Liability Company were filed on _____ and signed _____
Florida document number L17000140027

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:

Principal office address MUST BE A STREET ADDRESS

3830 s.w. 104 court

Miami, FL 33165

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

3830 s.w. 104 court

Miami, FL 33165

. 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:

Norys Diaz-Rodriguez

New Registered Office Address:

3830 s.w. 104 court

Enter Florida street address

Miami

Florida

33165

City

Zip Code

With 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Norys Diaz-Rodriguez	3830 sw 104 court Miami, FL 33165	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

11-11-11

18 FEB 21 PM 12:01

10

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.

Dated **February 15**, **2018**

Signature of a member or authorized representative of a member

Denisse Diaz

Typed or printed name of signee