L17000 197810

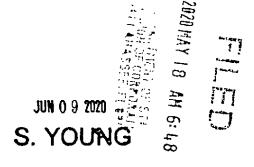
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COVER LETTER

TO:

	ation Section a of Corporations				
,	7109 (1)	いってはせん	6700 RD	110	
SUBJECT: <u></u>	210100	Name of Limited	d Liability Company	<u>, </u>	 _
The enclosed Ar	ticles of Amendment ar	nd fee(s) are submi	ued for filing.		
Please return all	correspondence concer	ning this matter to	the following:		
		MURA E	Name of Person		
			2774ING TON Finn/Company		22
	_ 02	809 N.	E 15 th S		
	Pon	1PANO E	3EAC14, 1FL City/State and Zip Code	<u>- 38</u>	062
		LOWD(-) E-mail address: (to	122A @ A-V	report notification)	
For further infor	mation concerning this	matter, please call	:		
LAU	2A Owb AD Name of Person	zA	at (305) Area Code	Daytime Telepho	733 one Number
Enclosed is a ch	eck for the following a	mount:			
□ \$25.00 Filir	og Fee 🔲 \$30.00 I Certifi	Filing Fee & cate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O. I	g Address: tration Section on of Corporations Box 6327 nassee, FL 32314		Division The Cen 2415 N	Idress: ation Section n of Corporation ntre of Tallaha . Monroe Stree ssee, FL 32303	ssee et, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2/09 U)OCTHIN 670 N (Name of the Limited Liability Compar (A Florida Limited L.	S RS. LLC	DEZO HAY
(Name of the Limited Liability Compar (A Florida Limited L	iability Company)	المعدد المدادة
The Articles of Organization for this Limited Liability Company	were filed on $9/22/2$	20/7 and assigned
Florida document number <u>L17000 197810</u>		2017 and assigned 6:
This amendment is submitted to amend the following:		49
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company "the designation "[1] C" o	or the abbreviation "LLC"
•	try company, the designation line of	A tile doore vidion 13,124.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
B. If amending the registered agent and/or registered office a	ddress on our records, enter th	ne name of the new registered
agent and/or the new registered office address here:		
New Charles D. Carried Cons		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida Zip Code
	City	zīp €oae

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
AMBR	ADRIANA ONDARZA	89 37d AUE., #1	BAdd
		ATLANTEC HEGHLANDS	<u>S</u> □Remove 716
			□ Change
AWBR_	ALETANORO ONDARZA	2809 NE 15# ST.	
		PSUPANO BEAULFL 3	3062 □Remove
			Change
			🗆 Add
			□Remove
			🗆 Change
			□Add
			□Remove
			☐ Change
			🗆 Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
If an c	tive date, if other than the date of filing: MAG & 2020 (optional) flective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605,0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco	and 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 filed.
Dated	Signature of a member
	LOndosia-
	Signature of a member or authorized representative of a member
	CAURA ONDATE A Typed or printed name of signee

Filing Fee: \$25.00