L17000 200291

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COVER LETTER

Division of Cor	porations		
SUBJECT:	21R25 PROI	DUCTIONS LLC	
30DJEC1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CARLOS E BURGOS G		
		Name of Person	
	LATIN AMERICAN CON	ISULTANTS LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	2910 NW 130TH AVENU	E. SUITE 311	
		Address	
	SUNRISE, FLORIDA 333	23	
		City/State and Zip Code	
		ULTANTS@GMAIL.COM	
	h-mail address; (to be used for future annual report notifi	cation)
For further information of	oncerning this matter, please ca	ill:	
CARLOS E. BURGOS O	J.	954 6554449	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

21R25 PRODU	ICTIONS LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000200291</u>	were filed on 09/27/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the abl	breviation "L.L.C."
Enter new principal offices address, if applicable:	1920 Celebration Blvd. Apt 105	
(Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34747	
Enter new mailing address, if applicable:	1920 Celebration Blvd. Apt 105	
(Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, FL 34747	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on our records, <u>enter</u>	the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
N. B. C. Land C.	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am forovided for in Chapter 605, F.S. Or	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Kissimmee, FL 34747	□ Add
	□ Remove
	■ Change
VP PAOLA GUERRERO LUGO 1920 Celebration Blvd. Apt 105	.□ Add
Kissimmee, FL 34747	□ Remove
	■ Change
	.□ Add
	□ Remove
	☐ Change
	□ Add
	□ Remove
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	□ Add
	Remove
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If the date inserted in this block d ment's effective date on the Departi	ectific and cannot be prior to date of filing or more than 90 does not meet the applicable statutory filing requirement of State's records. Ective date, but not an effective time, at 1:	ints, this date will not be liste
SEPTEMBER, 28TH	2017	
	Ville Min	17 SAC SAC
Signa	iture of a member of authorited representative of a member	
	RICHARD VILLALOBOS	FILED 123 AM
	Typed or printed name of signee	
		المساد كالمساد المراب
		STATE CORIDA

Filing Fee: \$25.00