K17000231497

(Requestor's Name)
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FLORIDA DEPARTMENT OF STATE TARY OF STATE Division of Corporations TALLAHASSEE. FL

January 18, 2022

CAMILO ESPINOSA 40 SW 13TH STREET SUITE 102 MIAMI, FL 33130

SUBJECT: ALMANZAR CONSTANZO Y ASOCIADOS LLC

Ref. Number: L17000231497

We have received your document for ALMANZAR CONSTANZO Y ASOCIADOS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2019 annual report. The entity must be reinstated before this document can be filed.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Tallahassee, FL 32314

	ALMANZAR CONSTANZO Y ASOCIADOS LLC								
JI:	Name of Lim	ited Liability Company							
osed Articles of	Amendment and fee(s) are sub	mitted for filing.							
eturn all correspo	ondence concerning this matter	to the following:							
	Camilo Espinosa								
		Name of Person							
	Loigica PA								
		Firm/Company	 						
	40 SW 13th Street Suite 10	02							
		Address							
	Miami Florida 33130								
		City/State and Zip Code							
	E-mail address: (to be used for future annual report no	otification)						
er information o	concerning this matter, please co	all:							
Espinosa		786 292 9	704						
Name o	f Person	Area Code Dayti	ime Telephone Number						
l is a check for t	he following amount:								
00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)						
Registration : Division of C	Section Corporations	Street Address: Registration S Division of C	orporations						
	ALMANZ CT: ALMANZ CT: osed Articles of eturn all correspond Espinosa Name of the control of t	Osed Articles of Amendment and fee(s) are substant all correspondence concerning this matter Camilo Espinosa Loigica PA 40 SW 13th Street Suite 16 Miami Florida 33130 E-mail address: (ber information concerning this matter, please concerning this matter) Espinosa Name of Person It is a check for the following amount: 00 Filing Fee \$30.00 Filing Fee & Certificate of Status Mailing Address: Registration Section Division of Corporations	ALMANZAR CONSTANZO Y ASOCIADOS LLC Tham of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing. Sturm all correspondence concerning this matter to the following: Camilo Espinosa Name of Person Loigica PA Finn/Company 40 SW 13th Street Suite 102 Address Miami Florida 33130 City/State and Zip Code E-mail address: (to be used for future annual report in the information concerning this matter, please call: Espinosa Name of Person It is a check for the following amount: 00 Fiting Fee \$30.00 Fiting Fee & Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Street Address: Registration Section						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALMANZAR CONSTANZO Y ASOCIADOS 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 v	vere filed on 11/08/2017	and assigned
Florida document number <u>L17000231497</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Auditfix L1.C		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the a	abbreviation "L.L.C."
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)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our records, enter the nai	ne of the new registered
		2022 CK
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	\$
	, Florida _	유를그
	Cuy	OF E TO
New Registered Agent's Signature, if changing Registered Agent:		₩ 0
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am vovided for in Chapter 605, F.S. Or	familiar with and ; if this document is

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
			□Add
			□Remove
			□ Change
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an effective	date is listed, the	e date must b	e specific an	d cannot be a	prior to da	ite of tiling	g or more th	an 90 days a	otional) iter filing.) P	ursuant to 605.0	0207
ote: If the	date inserted effective date	in this bloc	k does not i	meet the ap	pplicable	statutory	filing requ	iirements,	this date w	ll not be listed	d as
record sper	ities a delayed	l effective c	late, but no	t an effecti	ve time.	at 12:01 :	a.m. on the	earlier of	(h) The 9	Oth day after:	Three
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Filing Fee: \$25.00