## 117000247600

(Requestor's Name)	-
(Address)	-
(Address)	-
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	]
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Office Use Only



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## **COVER LETTER**

TO: Registration Division of C			
	SIEMBRA FRESH L	LC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles	of Amendment and fee(s) are subi	nitted for filing.	ŭ.
Please return all corres	pondence concerning this matter t	to the following:	
	os	SCAR R. RODRIGUEZ	, ,
		Name of Person	>
	S	HEMBRA FRESH, LLC	بب س د. د
		Firm/Company	
	2310	CEDAR GARDEN DR	
		Address	
	OR	RLANDO, FL 32824	
	siembrafi	City/State and Zip Code reshllc@gmail.com	<del></del>
	E-mail address: (	to be used for future annual report noti	fication)
For further informatio	n concerning this matter, please ca	all;	
Oscar R.	Rodriguez	917 288-8845	5
Nam	ne of Person	Area Code Daytim	ne Telephone Number
Englaced is a check for	or the following amount:		
\$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ALING ADDRESS: distration Section ision of Corporations Box 6327 lahassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive C	on orations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SIEMBRA FRE	•		
( <u>Name of the Limit</u>	ed Liability Compa (A Florida Limited I	ny as it <u>now appears</u> Liability Company)	on our records.)	
he Articles of Organization for this Limited L			12/04/2017	and assigned
lorida document numberL17000247600				
his amendment is submitted to amend the follo				
a. If amending name, enter the new name o				1 17
he new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the de	signation "LLC" or the abb	oreviation L.L.C.
Enter new principal offices address, if applic	able:	2310 CEDAR G	SARDEN DR	₩ 
Principal office address MUST BE A STREE		ORLANDO, FL	32824	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6021 SW 97TH		
B. If amending the registered agent and registered agent and	or registered o	ffice address on	our records, enter	the name of the
egistered agent and/or the new registered o	ince address her	<u>c</u> .		
Name of New Registered Agent:	OSCAR R. R	ODRIGUEZ		
New Registered Office Address:	2310 CEDAR	GARDEN DR		
11011 11051110100 0 11100 11000 000		Enter Flori	da street address	
	ORLANDO		, Florida	32824
		City		Zip Code

## 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>Name</u>	<u>Address</u>	Type of Action
BELTRE SOLIS, ALFREDO		<b></b>
	2515 S. CONWAY RD, STE 4	
	ORLANDO, FL 32824	■ Remove
DODDICHEZ OSCAD, D	2210 CEDAR CARDEN DR	
ROURIGUEZ OSCAR, R	ORLANDO, FL 32824	<b>■</b> Add
		_
		Remove_
		Remove
		Change
HOYOS, ANGELICA M		> 1
		Add J
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		Change
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		L Remove
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		Change
		Add
		Remove
		□ Change
	<del></del>	BELTRE SOLIS, ALFREDO  2515 S. CONWAY RD, STE 4 ORLANDO, FL 32824  RODRIGUEZ OSCAR, R  2310 CEDAR GARDEN DR ORLANDO, FL 32824

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ffective date if other than the date of filing:	(optional)	
ffective date, if other than the date of filing:  'an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	90 days after filing	<ul> <li>Pursuant to 605.020</li> </ul>
e record specifies a delayed effective date, but not an effective time, a The 90th day after the record is filed.	at 12:01 a.m.	on the earlier o
Dated <u>Sept 25 2018</u> .		
Marko		
Signature of a member or authorized representative of a me	mber	
OSCOI Ricordo Red 1902.  Typed or printed name of signee		

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Filing Fee: \$25.00