

L18000008123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

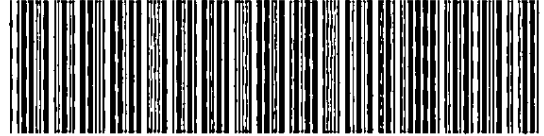
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Jul 31 2023



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FILED
JUL 31 2023
JUL 31 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NETDATA SA, 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:

DONALDO CASTRO

Name of Person

Firm/Company

2141 NW 34th STREET

Address

MIAMI, FL 33142-5419

City/State and Zip Code

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

For further information concerning this matter, please call:

DONALDO CASTRO

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NETDATA SA, 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 were filed on 01/09/2018 and assigned
Florida document number L18000008123.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NET DATA SA, LLC

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:

10440 NW 37TH TERRACE

(Principal office address MUST BE A STREET ADDRESS)

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. 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:

New Registered Office Address:

Enter Florida street address

City, Florida

Zip Co

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>	<u>Address</u>	<u>Type of Action</u>
P	NET DATA SA ✓	Residencial Santa Monica, Bloque 3 # 28	<input checked="" type="checkbox"/> Add
		San Pedro Sula, Cortes, Honduras	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DONALDO CASTRO ✓	2141 NW 34th STREET	<input type="checkbox"/> Add
		Miami, FL 33142	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	NIMIA L RODAS OSORTO ✓	Residencial Santa Monica, Bloque 3 # 28	<input type="checkbox"/> Add
		San Pedro Sula, Cortes, Honduras	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KEYLIIN MENDOZA	2141 NW 34TH ST	<input type="checkbox"/> Add
		Miami, FL 33142	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	FERNANDO A BRICENO RAMIREZ	Residencial Santa Monica, Bloque 3 # 28	<input type="checkbox"/> Add
		San Pedro Sula, Cortes, Honduras	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)



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