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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ANDRADE CANONA	LLC.
Name of Limited L	iability Company
The enclosed Articles of Amendment and fee(s) are submitted	d for filing.
Please return all correspondence concerning this matter to the	e following:
ELDRA ANDR	PADE DRTEGU Name of Person
ANDRADE CAT	UDN A- Firm/Company
704 SW 17th	AVENUE SUITE 4
MIAMI, 17 3.	3135
OFFILE (O ACVI) E-mail address: (to be to	SAS. COM used for future annual report notification)
For further information concerning this matter, please call:	
Elora Ortigo	at (305) 992-6825 Area Code Daytime Telephone Number
Name & Person	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 & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
sent previously, will be applied	CTRUT(CAMDIEN ARABEOS
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



August 10, 2018

ELORA ANDRADE ORTEGA, ESQ. 704 SW 17TH AVE, STE 4 MIAMI, FL 33135

USPS TRACKING # 9114 9999 4423 8733 1161 57 & CUSTOMER RECEIPT For Tracking or inquiries go to USPS com or call 1-800-222-1811.

SUBJECT: ANDRADE CANONA, LLC.

Ref. Number: L18000009886

We have received your document for ANDRADE CANONA, 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):

To notify this office that this entity is a professional limited liability company, you must file articles of amendment to the articles of organization. A blank form is enclosed for your convenience. The amendment should include the new name with the appropriate suffix (PLLC, P.L.L.C or Professional Limited Liability Company) and must include the specific purpose for the professional limited liability company.

Please note that the funds previously received for the improper conversion filing will be applied to the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any guestions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan Senior Section Administrator

Letter Number: 118A00016501

(2)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANDRADE CANON	A, LLC.	As =
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our record Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L1800009886</u> .	were filed on \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	18 September 2 C
This amendment is submitted to amend the following:		081 C
A. If amending name, enter the new name of the limited liab ANDRADE (ANONA, PLLC		Ş
The new name must be distinguishable and contain the words "Limited Liabi		. 1
Enter new principal offices address, if applicable:	11.1.	r address
(Principal office address MUST BE A STREET ADDRESS)	704 SW 17th Miami, PL 33	Avenue, Suite 4 135
Enter new mailing address, if applicable:	MAILING ADIX	ESS SAME AS
(Mailing address MAY BE A POST OFFICE BOX)	PRINCIPAL UFF	ICE ADBLESS
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:		s, <u>enter the name of the nev</u>
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street addres	77
	, F1	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		·
I have be a second the appropriate out of a second agent and are	and to not in this cannoing I for	ether agree to comply with the

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 = M $AMBR = A$	lanager uthorized Member	•	
<u>Title</u>	Name	Address	Type of Action
		-	□ Remove
			Change
			☐ Remove
			□ Change
			D Add
			☐ Remove
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in effective date ote: If the da	if other than the dat is listed, the date must be e inserted in this block ctive date on the Depar	specific and canno does not meet the	he applicable statu	filing or more man 9	(optional) 0 days after filing.) Pu ments, this date wil	rsuant to 605.0201 I not be listed as
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Filing Fee: \$25.00