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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJ.	PAPONES	LLC		
SUBJ.	ECT	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Pablo Goyenechea		
			Name of Person	
		Goyenechea Professional S	Services LLC	
			Firm/Company	
		806 Lakeview Circle		
			Address	
		Royal Palm Beach, Florida	33411	
		pgoyenechea@hotmail.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report noti	fication)
For tu	rther information c	oncerning this matter, please ca	alt:	
Pablo	Goyenechea		561 253-5903 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAPONES LLC			<u> </u>		
(Name of the Lim	ited Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited 1 Florida document number L18000010657	.iability Company	were filed on 01/11/2018	and assigned		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Labi	hiy Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		221 W Hallandale Beach Blvd #312			
(Principal office address MUST BE A STRE.	ET ADDRESS)	Hallandale Beach, Fl 33009			
Enter new mailing address, if applicable:		221 W Hallandale Beach Blvd #	312		
(Mailing address MAY BE A POST OFFICE	(BOX)	Hallandale Beach, Fl 33009			
B. If amending the registered agent and registered agent and/or the new registered of	-		enter the name of the be		
Name of New Registered Agent: Goyenechea Pr		ofessional Services LLC	mo P M		
New Registered Office Address:	806 Lakeview				
		Enter Florida street address	DI 01		
	Royal Palm Be	City Flo	rida 33411 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 at or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Fernandez Leonardo J	221 W Hallandale Beach Blvd #312. Hallandale Beach, Fl 33009	
			□ Remove
			☐ Change
AMBR	Brigando Franco	221 W Hallandale Beach Blvd #312, Hallandale Beach, Fl 33009	∃ Add
			□ Remove
			☐ Change
AMBR	D'Angelo Hernan D	2195 Palm Avenue #5101 Miramar, Fl 33025	Add
			■ Remove
			Change
			Add
			□ Remove
			Change
			
			□ Remove
			Change
			□ Add
			□ Remove
			Change

			
			
	<u></u>		
	08/19/2019		
Effective date, if other than the	date of filing:	a data of filing or more th	(optional) an 90 days after filing.) Pursuant to 605.02
Note: If the date inserted in this bl	ock does not meet the applica	ble statutory filing requ	airements, this date will not be listed:
document's effective date on the D	epartment of State's records.		
		66 11 11 11 11	-1.12.01 bb
he record specifies a delayed The 90th day after the rec		an effective time,	at 12:01 a.m. on the earlier
·			
Dated August 27	2019		
7/1/2/		<u> </u>	
Vale			
	Signature of a member or autho	rized representative of a r	nember
Pablo Goyenechea			
<u> </u>	Typed or nunte	d name of signee	

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Filing Fee: \$25.00