## U8000 45654

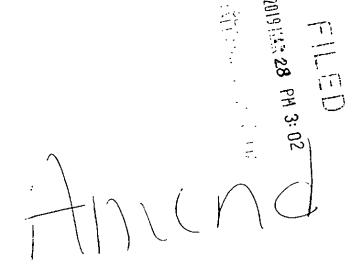
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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MAR 28 ZUTA I ALBRITTON



March 16, 2019

MIGUEL ANGEL MARTINEZ LLC 300 RICHARDS AVE CLEARWATER, FL 33755

SUBJECT: MIGUEL ANGEL MARTINEZ LLC

Ref. Number: L18000045654

We have received your document for MIGUEL ANGEL MARTINEZ LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please sign the document in your legal signature as your signature is printed in the space provided.

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

Irene Albritton Regulatory Specialist II

Letter Number: 219A00005281

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

$\cdot$ . $1$	<b>O</b>
ARTICLES OF O	PRGANIZATION 20/2 //
O	ORGANIZATION  F  A 2  A 3  A 3  A 3  A 3  A 3  A 3  A 3
Miguel Angel Martin	17 LLC 1/2 1/3
Miguel Angel Martin (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)
	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company	were filed on LIECT CONIC and assigned
Florida document number L1800045654	
Torida document nameer <u>From 150 From 1</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
<u> </u>	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company" the designation "11 C" or the abbreviation "1.1.C."
The new name must be distinguishable and contain the words. Islanded trausit	,
Enter new principal offices address, if applicable:	300 Richards ave, Clearwater, Florida 33755
(Principal office address MUST BE A STREET ADDRESS)	Clearwater, Florita 33755
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
(Mulling address MAT BE A FOST OFFICE BOX)	
B. If amending the registered agent and/or registered of	ffice 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:	
Name of New Registered Agent.	
New Registered Office Address:	
	Enter Florida street address
	Florida

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Miguel Martinez	300 Richards we Clearwater, Florida 3375	<b>₩</b> Add
	v	Clearwater, Florida 3375	<b>5</b> _□ Remove
			Change
MGR Joel Martinez	Joel Martinez	1253 turner St Apt6	□ Add
	Clearus	Clearunter, Florida 3375	6B Remove
			Change
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an effe	te date, if other than the date of filing: (optional)  trive 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	.020°.
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	zu as
e reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie	er o
The	90th day after the record is filed.	
Dated _	3/1/2019 5:30	
	Signature of a member or authorized representative of a member	
	Signature of a memori of authorized representative of a memori	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00