

L18000074032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

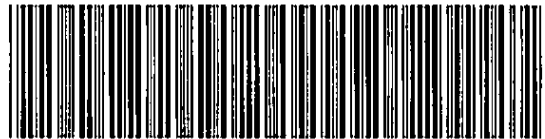
(Business Entity Name)

(Document Number)

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JUN 24 2019
S. YOUNG

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19 JUN 12 PM 6:35
S. YOUNG
FBI ASST. CLERK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SHOW CONSULTANTS & MANAGEMENT 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:

VERONICA MARSHALL

Name of Person

EMPRENDE CON EXITO LLC

Firm/Company

350 S MIAMI AVENUE APT 3611

Address

MIAMI, FL 33130

City/State and Zip Code

veronicamkiter@gmail.com

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

For further information concerning this matter, please call:

VERONICA MARSHALL

754 246-9854
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

SHOW CONSULTANTS & MANAGEMENT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
19 JUN 12 PM 6:35
CLERK OF CIRCUIT COURT
MIAMI, FL 33130

The Articles of Organization for this Limited Liability Company were filed on 03/22/2018 and assigned
Florida document number L18000074032.

This amendment is submitted to amend the following:

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

EMPRENDE CON EXITO 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:

350 S MIAMI AVENUE APT 3611

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33130

Enter new mailing address, if applicable:

350 S MIAMI AVENUE APT 3611

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33130

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

_____, Florida _____
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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BLEMUR, ANIS	685 NE 126TH STREET NORTH MIAMI, FL 33161	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Romina P. Pinao	4560 NW 107 Ave, Apt 304 Doral FL 33178	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<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)

(b) The 90th day after the record is filed.

2019

[Signature]

Signature of a member or authorized representative of a member

VERONICA MARSHALL

Typed or printed name of signee