118000089975

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasmoss Limity Harris)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900312689249

05/03/18--01008--025 **25.00



COVER LETTER

TO:

TO:	Registration Se Division of Cor			
	ALEJAND	RO RODRIGUEZ SR LLC		
SUBJE	ECT:	Name of Lin	nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ALEJANDRO RODRIGU	JEZ SR	
			Name of Person	·
		ALEJANDRO RODRIGU	JEZ SR LLC	2
		Firm/Company	THE HAY	
		1132 CHESTERFIELD C	OURT	
			Address	
		KISSIMME, FL 34758		
		ALEJANDRO.RODRIGU	City/State and Zip Code EZSR@OUTLOOK.COM	
			to be used for future annual report not	ification)
		oncerning this matter, please of		
ALEJA	NDRO RODRIG	UEZ SR	407 450-5312 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclose	ed is a check for th	ne 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)
	Registr Divisio P.O. Bo	and ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corpon Clifton Building 2661 Executive Control	on rations enter Circle

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

ALEJANDRO RODRIGUEZ SR LLC	
(Name of the Limited Liability Company as (A Florida Limited Liability	it now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were Florida document number L18000089975	filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	The state of the s
	No. of the last of
•	هېرون لاي کې د د د د د د د د د د د د د د د د د د
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
· 	<u> </u>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, <u>enter the name of the ne</u>
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>	Address	Type of Action
MGR	YAJAIRA RODRIGUEZ	1132 CHESTERFIELD CT	E2 A.J.
····		KISSIMMEE, FL 34758	
			□ Remove
			☐ Change
AMBR	DASLYN J RODRIGUEZ	1132 CHESTERFIELD CT	Add
		KISSIMMEE, FL 34758	□ Remove
			☐ Change
AMBR	SAMUEL E RODRIGUEZ	1132 CHESTERFIELD CT	
		KISSIMME, FL 34758	□ Remove
			☐ Change
			Remove Change Add
			Change ☐ Add
			☐ Remove

				····
				
 				
• • • • • • • • • • • • • • • • • • • •				
			1 2 c 7 2 c 7 2 c	2910
			The state of	
			QH.	
			Fights 12 to may right	<u>~~</u> ;
		· · · · · · · · · · · · · · · · · · ·		
			Spending to the state of the st	<u> </u>
		<u> </u>		
ffective date, if other than the	ne date of filing: nust be specific and cannot be prior to date	of files or more than 00 days a	ptional)	rement to 605 0'
Note: If the date inserted in this	block does not meet the applicable st Department of State's records.	atutory filing requirements,	this date will	not be listed
e record specifies a delaye The 90th day after the re	ed effective date, but not an ecord is filed.	effective time, at 12:0	1 a.m. on	the earlier
APRIL 30TH	2018			
	08			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00