L18000098459

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COVER LETTER

TO:

то:	Registration So Division of Co			
CHD IE	LP.M. 4 Y			
SUBJECT: Name of I		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		ISAAC PEREZ MARIN		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		I.P.M. 4 YOU LLC		
		6623 FESTIVAL LN	Firm/Company	
		ORLANDO, FL 32818 US	Address	
			City/State and Zip Code	
Don Good	h sa in faamsatissa s		o be used for future annual report no	otification)
	PEREZ MARIN	oncerning this matter, please ca	407 435-3482	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclose	d is a check for t	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	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

LP.M. 4 YOU LLC		
(<u>Name of the Limited I)</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number L18000098459		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abl	
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	- 6
		<i>5</i> − 1 1
Enter new mailing address, if applicable:		1:5
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter</u> address here:	the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Regis	 	

1

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with t 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

Page 1 of 3

If amendin or removed	g Authorized Person(s) authorized to r from our records:	nanage, <u>enter the title, name, and addi</u>	ress of each person being ad
MGR = Manager AMBR = Authorized Member			
<u>Title</u>	Name	Address	Type of Action
AMBR	EDUYN POZO		-
		6623 FESTIVAL I.N ORLANDO, FL 32818	Add Remove
			☐ Change
AM BR	YASEL GONZALEZ INFANTE		
		6623 FESTIVAL LN ORLANDO, FL 32818	Remove
			Change
			Add
			☐ Remove
			Change
			Bemove
			Change
		<u> </u>	
			□ Remove
			☐ Change
			Remove
			□ Change

D. If amending any other in	oformation, enter change(s) here: (Attach additional sheets, if necessary.)	
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	05.12/2010	
. Effective date, if other th	an the date of filing: (optional)	
(If an effective date is listed, the object. If the date inserted in	date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 this block does not meet the applicable statutory filing requirements, this date will not be list	5.0207 (ted as t
document's effective date of	n the Department of State's records.	ica a, r
the record specifies a do b) The 90th day after th	elayed effective date, but not an effective time, at 12:01 a.m. on the earlience record is filed.	er of:
Dated	2019	
Dated	· · · · · · · · · · · · · · · · · · ·	
	Signature of a member or authorized representative of a member	
	tone terms Marin	
	Teaac terez Marin Typed or printed name of signee	
	Page 3 of 3	
	Filing Fee: \$25.00	