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J. HARRIE

## COVER LETTER \*

	ration Section of Corpor						
SUBJECT: _	NA	RANJO Nani	e of Limited ?	<u>МРД/</u> clability Co	√ <u>√</u>	LLC	, <u></u>
The enclosed A	rticles of Am	endment and fee(s)	are submitte	d for filin	g.		
Please return all	corresponde	ence concerning this	matter to th	e followin	g:		
		E	sther	Name of	aran Person C	jo	<del></del>
		Naran	ijo C.	Ompa Fim/Co	mpany	LLC	
		1999	NW	136 <sup>4</sup>	L. Ave	. Apt	460
		Sunri	ise	FL	33	323	<del></del>
	, e	Sunranjo e	Sthe C ddress: (to be	used for fu	nail	C Om eport notificat	ion)
For further infor	1111	erning this matter. p					2824
Esth	er H	aranjo rson		_ at ( <u>7</u> :	<u>ر ( 54</u>	252-	3909
	Name of Pe	rson 🗸		Area	Code	Daytime Te	lephone Number
į		ollowing amount:					
525.00 Filin	g Fee 1	□ \$30.00 Filing Fee Certificate of St		Certifie			☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
,	Registration of P.O. Box 6	f Corporations	<u>-</u>	* ^ =	Registration of Clifton But 2661 Execution	on Section f Corporatio	Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NARANJO C	OMPANY LLC			
( <u>Name of the Limited</u> ) (A	OMPANY LLC Liability Company as it now appears on ou Florida Limited Liability Company)	r records.)		
The Articles of Organization for this Limited Liab Florida document number <u>48 000 11 80</u>	ility Company were filed on <u>Ma</u>	y 10, 2018	2and assig	ned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liability company here:			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation	on "LLC" or the abbre	viation "L.L.	<del>C.</del> "
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	ADDRESS)	<u> </u>	: 2:	
		<u></u>		
		;;;	2.	
Enter new mailing address, if applicable:		 !:-	<b>(-)</b>	
(Mailing address MAY BE A POST OFFICE BO			3F1	
<u> </u>		ί.	6. G.	<u> </u>
			. <u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our readdress here:	ecords, <u>enter the</u>	e name of	the new
Name of New Registered Agent:			·	<del></del>
New Registered Office Address:	Enter Florula stree	et address		
-		Florida	Zip Code	
Name Descriptional Agamete Cinemature of the main Description	Internal America		•	

## 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 Title Name Address Esther Naranjo 1999 NW 136-Are Apt 460 33323 FL □ Remove Change MGR Luis Haranjo 1999 NW 136th Am Apt 460 DAda Sunnise FL 33323 Remove \_\_\_ Change □ Add □ Remove ☐ Change □ Add □ Remove □ Remove □ Change \_ \_□Îλdd Çø ☐ Remove

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ir amending ai	iy other information,	, enter change(s) here:	: (Allach addilional)	sheets, if necessary	.)	
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fan effective date Note: If the date locument's effe e record spe	e inserted in this block d ctive date on the Departi	specific and cannot be prior to does not meet the applical ment of State's records. Tective date, but not	ble statutory filing req	uirements, this date v	vill not be lis	sted as t
ated <u>June</u>	144	2013				
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	Esther	Maranjo de Typed or printed	Iname of signee	2	- <del>73</del> 5-	90
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Filing Fee: \$25.00