

L18 0000 122 770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

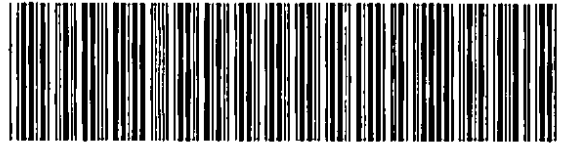
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100374777741

10/14/21--01012--003 \*\*30.00

10/26/21

T.A.S.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 OCT 14 PM 1:28

FILED

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Cinagro Investments 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:

Maria Lorena Izabal Ponce  
Name of Person

Cinagro Investments LLC  
Firm/Company

2430 Vanderbilt Beach Rd., Suite 108, PMB 190  
Address

Naples, Florida 34109  
City/State and Zip Code

lorena.decicco@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Lorena Izabal Ponce at ( 239 ) 898-3958  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

CINAGRO INVESTMENTS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/16/2018 and assigned  
Florida document number L180001227770

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2430 Vanderbilt Beach Rd., Ste 108  
Naples, FL 34109

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2430 Vanderbilt Beach Rd., Ste 108  
PMB 190  
Naples, FL 34109

**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:

Maria Lorena Izabal Ponce

New Registered Office Address:

2430 Vanderbilt Beach Rd., Ste 108

Enter Florida street address

Naples

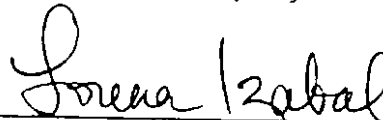
City

Florida 34109

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 add 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	JESSE DECICCO	1900 NORTH TAMiami TRAIL	<input type="checkbox"/> Add
		NORTH FORT MYERS, FL 33903	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MARIA LORENA ISABAL PONC	13843 LUNA DRIVE	<input checked="" type="checkbox"/> Add
		NAPLES, FL 34109	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 OCT 14 PM 4:28  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

MARIA LORENA ISABAL PONCE IS THE SOLE MEMBER AND OWNS 100% OF THE LLC

2021 OCT 14 PM 1:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(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)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 24th 2021

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

JESSE DECICCO

Jesse Decicco  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**