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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Divis	aion of Corp	oorations				
SUBJECT:	ANDRESIN	LLC				
SUBJECT: _		Name of Limi	ted Liability Company		<del></del>	
The enclosed .	Articles of z	Amendment and fee(s) are sub-	mitted for filing.			
Please return :	all correspor	idence concerning this matter	to the following:			
		Andres A Gago				
			Name of Person			
			Firm Company		<del>_</del>	
		15519 Miami Lakeway N <sup>‡</sup>				
		Address				
		Miami Lakes FL 33014	_			
		andygago@aol.com	City/State and Zip Code			
			to be used for future annual te	port notification	)	
For further in	formation co	oncerning this matter, please co	all:			
Andres A Ga	go		305 558- at ()	4090		
	Name of	Person	Area Code	Daytime Telep	hone Number	
Enclosed is a	check for th	e following amount:				
<b>\$</b> \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy tadditional copy is enclo		□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	MAILI	NG ADDRESS:	STREET/	COURIER AI	DDRESS:	

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

TO:

Registration Section

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANDRESIN LLA			
(Name of the Limit	ed Liability Compar (A Florida Limited L	ny as it now appears on our reco hability Company)	ords.)
The Articles of Organization for this Limited L. Florida document number L18000136305		were filed on <u>5/31/2018</u>	and assigned
This amendment is submitted to amend the foll			
A. If amending name, <u>enter the new name o</u>	f the limited liabi	ility company here:	
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
Principal office address MUST BE A STREE	<u>(T ADDRESS)</u>		
Enter new mailing address, if applicable:			2m 2 2K 2
Mailing address MAY BE A POST OFFICE	<u>BON)</u>		
B. If amending the registered agent and registered agent and/or the new registered o	•		rds, enter the name of the
Name of New Registered Agent:	Andre	s A. Gago	ay North # 103
New Registered Office Address:	15519	Hiami Lakewa Enter Florida street add	ay North # 103
	Miami Lakes		Florida 33014 Zip Code
		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
AP	Gago, Andres	15519 Miami Lakeway North #103	
		Miami Lakes FL 33014	■ Remove
			☐ Change
AP	Gago, Andres A	15519 Miami Lakeway North #103	
		Miami Lakes FL 33014	□ Remove
			Change
			☐ Remove
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			□ Remove
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tive date, if other than the date of filing: [rective date is listed, the date must be specific and cannot be prior to date of filing or	(optional) more than 90 days after filing.) Pursuant to 605	5.02
If the date inserted in this block does not meet the applicable statutory filiment's effective date on the Department of State's records.	ng requirements, this date will not be list	.eu :
cord specifies a delayed effective date, but not an effective goth day after the record is filed.	time, at 12:01 a.m. on the earlie	er
June 6 2018.		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00