### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H21000205116 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GFS TAX & ACCOUNTING SERVICES

Account Number : 120140000089

: (754)301-2128

Fax Number

: (954)252-4650

\*\*Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.\*\* Email Address: INFO @ GFSTAXA

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ALCARA LLC**

Certificate of Status	
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

TQ:

Registration Section

From: Juliana dos santos

# H210002051163

#### **COVER LETTER**

Division of Cor	porations		
ALCARA I			
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	JULIANA MACHADO, C	PA	
		Name of Person	
	GFS TAX & ACCOUNTIN	NG SERVICES	
		Firm/Company	
	11764 W SAMPLE RD ST	E 102	
		Address	
	CORAL SPRINGS, FL 33	065	
		City/State and Zip Code	
	INFO@GFSTAXACCT.CC	DM to be used for future annual report notif	lication)
For further information of	concerning this matter, please c		
JULIANA MACHADO		754 301-2128 at ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
<u>Mailing Addre</u> Registration	ss: Section	<u>Street Address:</u> Registration Sec	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 631	27	The Centre of T	allahassee

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

4210002051163

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALCARA LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our record liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Plorida document number L18000181346		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	llity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	or the abbrevi
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Enter new mailing address, if applicable:		E.F. P.
Mailing address MAY BE A POST OFFICE BOX		\$7.78 \$7.78
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter</u>	the name of the new register
righte of New Registered Agent.		
New Registered Office Address:	Enter Florida street addres	ts
	. <b>F</b> 1	or <b>ida</b>
	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.

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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

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<u>Title</u>	Name	Address	Type of Action
MGR	DUARTE, REBECA MACEDO	8049 SW 17TH PLACE	■ Add
		DAVIE, FL 33324	
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		05/20/202				
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Note: If the date inserted in this bl document's effective date on the D	ock does no	it meet the appli	cable statutory	filing requirement	s, this date will	not be listed as t
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e record specifies a delayed effectived is filed.	e date, but r	not an effective	time, at 12:01 a	.m. on the earlier	of: (b) The 90	ith day after the
MAY 20TH		2021				
Dated MAY 2011	>	_ '	·			
JUAN O	2					
	Signature of	t a member or auti	nanzed represent	ative of a member		