L18000193124

(Re	questor's Name)	
		<u> </u>
(Ad	ldress)	
		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	- #)
(5.1	.yrototorzipii iloto	<i>, ,,</i>
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
		
Special Instructions to	Filing Officer:	ı
		i
I		

Office Use Only



800348940088

10/07/20--01019--020 **7.50

07/28/20--01041--035 **52.50

FILED
2020 OCT -9 MIII: 44

OCT 12 200

COVER LETTER

		of Cor	porations							
SURIFO	т. Д	.55	Cocos	Dry	vall	4LC				
3003170	-••			Name of Lim	ited Liability (lompany				
The encl	osed Artic	cles of	Amendment and	i fee(s) are sub	mitted for fil	ing.				
Please re	turn all co	orrespo	ndence concerni	ing this matter	to the follow	ing:				
			Ig,	La Cio	Pl- Name o	<u>して</u> of Person			-	
			<u></u>		Firm/C	ompany			-	
			430	N 80	ALba	n y dress	Ave		-	
			tar	npa 1	一 <u>し</u> . Citv/State a	3 3 (a. 0 and Zip Code	7		-	
								tion)	o ~~	
For furth	ner inform	ation c	oncerning this n	natter, please c	all:					
No	di no	Name o	-eyua f Person		at {	8(3) rea Code)	562 - Daytime Te	0571 elephone Numbe	<u></u>	
Enclosed	is a chec	k for t	ne following am	ount:						
□ \$25	,00 Filing	Fee	☐ \$30.00 Fi Certifica	ling Fee & ate of Status	Certif) Filing Fee Ted Copy onal copy is en		Certified	ite of Status &	
						* 0	checkis of \$100°	the rer Completi	natuind	amount the Charged for
	Mailing Registra	ation !	Section			Registi	ation Section	on	already	Charged tor
	Divisio P.O. Bo		orporations 7				on of Corpo intre of Tall			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Los Cocos dryw	all 11c	
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 8-13-2018 and assign	ned
Florida document number <u>L 18000 193124</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
n/A		
The new name must be distinguishable and contain the words ⁴ Limited Liabi		
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		=
		[T]
	ms =	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	and the same of the same	!
B. If amending the registered agent and/or registered office in a second of the new registered office address here:	address on our records, enter the name of the new r	egisterea
Name of New Registered Agent:	N/A	
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	
I hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with a provided for in Chapter 605, F.S. Or, if this docum	and ent is

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
AMBR	Nadina Leyra	4308 N Albany ave tampo Fl. 33607	MAdd
			□Remove
			□Change
			🗆 Add
			□Remove
			Remove 202 Pehange 174 Poka
		A A A A A A A A A A A A A A A A A A A	CT And AMERICAN CONTAINS
		ـــــــــــــــــــــــــــــــــــــ	Remove
			f 5 □Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			□Change

						<u> </u>					
				<u> </u>			<u>.</u>	-			<u>. </u>
-								<u>.</u>			
	<u>.</u>										_
										<u> </u>	
						<u>.</u>					_
								- -			
			·						320		
									> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
		- "-					 		<u> </u>		
					<u>-</u>		··-	<u></u> .—	<u> </u>	1:45	
					-					<u>. 01</u>	
-											
								<u></u>			
							·				
lf an effectiv Note: If th	date, if other we date is listed, the date inserted is effective date	he date must be s I in this block (specific ar does not	nd cannot meet the	e applica	o date of fili ble statuto	ng or more ry filing re	than 90 days	o ptional) after filing.) l s, this date w	Pursuant to ill not be	605,020 listed a:
e record sp rd is filed.	occifies a delaye	rd effective da	te, but no	ot an effi	ective tin	ne, at 12:0	ł a.m. on	the earlier c	of: (b) The	90th day	after the
Dated	9-27-	-120									
		·									

Filing Fee: \$25.00