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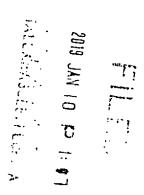
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(City	/State/Zip/Phone	∋ #)
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(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

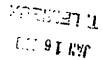
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divi	sion of Co	rporations		
SUBJECT:	Diana Te	ello LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Lir	nited Liability Company	
71% t 1				
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all corresp	ondence concerning this matter	to the following:	
			Diana C. Tello	
			Name of Person	
			JUNION CANO	LC
			Firm/Company	
			803 E Dilido Or.	
			Address	
			Miami Beach, FL 33139	
			City/State and Zip Code	
			diata83@gmail.com	
	r		to be used for future annual report notif	ication)
ror further int	formation c	concerning this matter, please co	att:	
Diana C.	Tello		at (_919200 5027	
	Name o	f Person	Area Code Daytime	: Telephone Number
		he following amount:		
\$25.00 Fil	ling Fee	☐ \$30.00 Fifing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAD	ING ADDRESS:	STD FFT/(/ALID D	ED AMMDECC.
	Registr	ration Section	STREET/COURT Registration Section	n
		on of Corporations ox 6327	Division of Corpora Clifton Building	ations

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

Dicate LLc

OF

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(Name of the Limited Liabil	lity Company as it now appears of it a Limited Liability Company)	Mrdeotard & 1: #1
The Articles of Organization for this Limited Liability (
Florida document number <u>L18000 211909</u>	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Diana Tello LLC		
The new name must be distinguishable and contain the words "Lit	nited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		records, enter the name of the n
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida sti	reet address
		, Florida
	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
			□ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
			□ ∧dd
			Remove
			□ Change
			□ Add
			Remove
			☐ Change
			□ Add
			□ Remove
			_□ Change

E. Effective date, if other than the date of filing:	207 (3)(as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier b) The 90th day after the record is filed.	of:
Dated December 10 2019	
Dana Tello	
Signature of a member or authorized representative of a member	
Diana C. Tello Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00