

L18 0000218909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

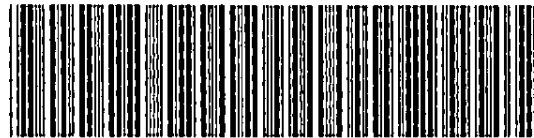
(Business Entity Name)

(Document Number)

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2020 JUN -8 AM 6:37

CLERK OF SUPERIOR COURT
JUN 11 2020

JUN 24 2020
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INUDEV 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:

Luciano Castro

Name of Person

INUDEV LLC

Firm/Company

15112 Naturewalk Drive

Address

Tampa, Florida 33624

City/State and Zip Code

luciano@inudev.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lannah Lee Hubner

813

5977424

at ()

Name of Person

Area Code

Daytime Telephone Number

closed 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**

INUDEV LLC

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

FILED
2020 JUN -8 AM 6:17
TAMPA, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/14/2018 and assigned
Florida document number L18000218909.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

15112 Naturewalk Drive

Tampa, Florida 33624

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

15112 Naturewalk Drive

Tampa, Florida 33624

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:

Hannah Lee Hubner

New Registered Office Address:

15112 Naturewalk Drive

Enter Florida street address

Tampa

City

Florida 33624

Zip Code

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Luciano Castro	38 No. 773	<input type="checkbox"/> Add
		La Plata, Buenos Aires 1900 Argentina	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Hannah Lee Hubner	15112 Naturewalk Drive	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33624	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Francisco Medina	39 No. 677 PB A	<input checked="" type="checkbox"/> Add
		La Plata, Buenos Aires 1900 Argentina	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Effective date, if other than the date of filing: _____ (optional)

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.

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

June 6 2020

Signature of a member or authorized representative of a member

Luciano Castro

Typed or printed name of signee