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## **COVER LETTER**

TO:

Registration Section

Division of	Corporations						
	RSIONES GARCIA USA. LLC						
SUBJECT:	WBJECT: Name of Limited Liability Company						
The enclosed Article	s of Amendment and fee(s) are sul	bmitted for filing.					
Please return all corr	espondence concerning this matter	r to the following:					
	Robert M. Chisholm	Robert M. Chisholm					
	Name of Person						
	Chisholm Law + Title						
	Firm/Company						
	7378 SW 48th Street. Suite B						
	Address						
	Miami, FL 33155						
		City/State and Zip Code					
	closings@chisholmlaw.cor						
	E-mail address:	(to be used for future annual report not	trication)				
For further informati	on concerning this matter, please of	call:					
Robert M. Chisholm		305 667-4261					
Name of Person			ne Telephone Number				
Enclosed is a check t	or the following amount:						
■ \$25.00 Filing Fe	e S30.00 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)				
Division of P.O. Box	on Section of Corporations	Street Address: A Registration Se Division of Contro. of 12415 N. Monro Fallahassee, FL	rporations] Fallahasseej e Street, Suite 810				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVERSIONES GARCIA USA, LLC

(Name of the Limited Liability Comp. (A Florida Limited	iny as it now appears on our r Liability Company)	ecor <u>ds.</u> )	<del></del>	
The Articles of Organization for this Limited Liability Company Florida document number L18000250140	were filed on 10/25/2018		and assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the ab	breviation "L.L.C	<del></del>
Enter new principal offices address, if applicable:			2024 SE	
(Principal office address MUST BE A STREET ADDRESS)	705 1/2N front St		8	1
	Allentown, Pennsylvania	18102		
Enter new mailing address, if applicable:			PH L	ED
(Mailing address MAY BE A POST OFFICE BOX)	<del>-</del>		FAR =	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>e</u>	nter the name	e of the new re	gistere
New Registered Office Address:				
	Enter Florida street a	ddress		
	7 %.	_, Florida	W 0 1	
New Registered Agent's Signature, if changing Registered Agent:	City		Zip Code	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity, performance of my dutio provided for in Chapter (	rs, and I am fo 505, F.S. Or,	amiliar with a if this docume	nd
If Chai	nging Registered Agent, <u>Signa</u>	ture of New Reg	istered Agent	<u></u>

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Garcia Calle, Vicente Andres	705 1/2 N Front St, Allen	itown, PA 18102 <sub>[] Add</sub>
			Remove
			■ Change
AMBR	Parrales Alvarado, Sonia Alexandra	705 1/2 N Front St, Aller	ntown, PA 18102⊡Add
			□ Remove
			■Change
			□Add
			Remove
			☐ Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□ Change
		···	□Add
			□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated \_\_\_\_\_\_29th of October, 2024 Sonia Alexandra Parrales Alvarado Vicente Andres Garcia Calle
Signature of a member or authorized representative of a member Sonia Alexandra Parrales Alvarado Vicente Andres Garcia Calle Typed or printed name of signee

ling Fee: \$25.00