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(Paguaciore Nama)
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(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO:		istration Sect sion of Corpe			an		
ori n i r	wor.	Orju, LLC		ų _n a	•		
SUBJE	LCI:		Name of Limi	ited Liability Company			
The end	closed	Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please	return	all correspond	dence concerning this matter	to the following:			
			Orlando Perez				
				Name of Person	<u> </u>		
			Orju, LLC				
				Firm/Company			
			135 14th Ave N				
				Address			
			St. Petersburg, FL 33701			2019	c STable
			1800orlando@gmail.com	City/State and Zip Code		JAN 2	100 EX 3: 150
				to be used for future annual report notif	ication)	CO	
For fur	ther in	nformation co	ncerning this matter, please co	ali:			
Orland	lo Pere	ez		727 459-1813 at ()			
		Name of	Person	Area Code Daytime	· Telephone Number		
Enclos	ed is a	check for the	following amount:				
⊠ \$2	5.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		1	
Orju, LLC			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	iy as it now appears on our records.) iability Company)		
		1	
The Articles of Organization for this Limited Liability Company	were filed on	$\frac{1}{2}$ and assi	igned
Florida document number L19000003959		1	
Torrow document rights of		1	
This amendment is submitted to amend the following:		- 1	
A. If amending name, enter the new name of the limited liabi	lity company here:	- 1	
4. If amending name, enter the new name of the named habi	nty company nere.	- 1	
		11 11 11 11	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the a	ibbreviation "L.I	L.C.
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		1	
Frincipal office dualess MOST DE A STREET ADDRESSY		<u> </u>	
			
		1	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			1
B. If amending the registered agent and/or registered of	fice address on our records, enter	r the name	of the new
registered agent and/or the new registered office address here			
		₹! 2 9	1
Name of New Registered Agent:		2019	معانيس
Traine of their megiotetes might		第二	1
New Registered Office Address:			
	Enter Florida street address		taring a
	, Florida _		<u>u</u> 1/3
	City	Zip Co de	4
ew Registered Agent's Signature, if changing Registered Agent:		<u>ම්</u> ධ න	- 1
hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further a	gree to comp	oly with the
ovisions of all statutes relative to the proper and complete	performance of my duties, and I am	ı familiar wit	h and \
rept the obligations of my position as registered agent as p	provided for in Chapter 605, F.S. Oi	r, if this docu	ıment i ş
ng filed to merely reflect a change in the registered office	address, I hereby confirm that the l	imited liabili	ty \

If Changing Registered Agent, Signature of New Registered Agent

pany has been notified in writing of this change.

uthorized Member		1
<u>Name</u>	Address	Type of Action
Myra Diaz-Perez	135 14th Ave N, St. Petersburg, FL 33701	
		Remove
		☐ Cḥange
		Add
		Remove
		Change
		D Add
		□ Remove
		Change
		A 28
		Remove
		Champse
		□ Add
		□ Remove
		Change
		□ Remove
	Myra Diaz-Perez	

amending any other information, enter change(s) he	re: (Attach additional sheets, if necessary.)
	2019
	<u> </u>
fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be priote: If the date inserted in this block does not meet the applicument's effective date on the Department of State's record	(optional) for to date of filing or more than 90 days after filing.) Pursuant to 605.0 licable statutory filing requirements, this date will not be listed ds.
The 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earlie
ted January 25 2019	
Signature of a member or au	athorized representative of a member
Orlando Perez	

Page 3 of 3

Filing Fee: \$25.00