## 4900027169

Office Use Only



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## **COVER LETTER**

TO:		istration Sectision of Corp				
cun II	17.7Th	J & A Sarmie	ento Investments LLC			
SUBJF	:C1:					
The end	closed	l Articles of A	mendment and fee(s) are sub-	nitted for filing.		
Please	return	all correspon	dence concerning this matter t	to the following:		
			Ariel Sarmiento			
				Name of Person	<del></del>	
				Firm/Company		
			14722 7th Ave E		2019 FEB	FT-
			Bradenton, F1, 34212	Address	21	
			buyandsell941@icloud.com	City/State and Zip Code	fication)	C
For fur	ther ir	nformation cor	E-mail address: (t neerning this matter, please ca	o be used for future annual report noti	fication)	
Christi		ıΛ .	Sarmiento	941 <del>186-9400</del> (	812-75%) e Telephone Number	
Enclose	ed is a	check for the	following amount:			
□ \$25	5.00 F	iling 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J & A Sarmiento Investments LLC

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our reco Liability Company)	rus.)			
The Articles of Organization for this Limited Liability Company lorida document number $\frac{L19000027169}{L19000027169}$ .	were filed on	and assigned			
this amendment is submitted to amend the following:					
. If amending name, enter the new name of the limited liabi	ility company here:				
criel Sarmiento LLC					
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L	LC" or the abbreviation "L.L.C."			
inter new principal offices address, if applicable:					
Principal office address MUST BE A STREET ADDRESS)		23			
		E. D. F			
Inter new mailing address, if applicable:		22 17			
•••	<del></del>				
Mailing address MAY BE A POST OFFICE BOX)					
		<u> </u>			
<ol> <li>If amending the registered agent and/or registered of egistered agent and/or the new registered office address here</li> </ol>		rds, enter the name of the			
Name of New Registered Agent:					
N 0 1 1007					
New Registered Office Address:	Enter Florida street address				
	Enter Florida street address				
	 City	Florida Zip Code			
	•	·			
ew Registered Agent's Signature, if changing Registered Agent:					

If Changing Registered Agent, Signature of New Registered Agent

f 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> </u>	<u>Name</u>	Address	Type of Action
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			Change
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record specifies a delay			an effective t	ime, at 12:01	a.m. on the	earlier of
The 90th day after the r	ecord is filed.					
February 14th		2019				
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Typed or printed name of signee

Filing Fee: \$25.00