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COVER LETTER

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TO: Registration Se Division of Cor			BOOKER O. S. T. C.
	Y CARLOS, LLC		The state of the s
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
•	ESTRELLA TEMPRANO		
		Name of Person	
	ESTRELLA Y CARLOS.	LLC	
	-	Firm/Company	
	8460 SW 156 PL 702		
	MIAMI/FLORIDA 33193	Address	
	TEMPRANOESTRELLA6	City/State and Zip Code 6@LIVE.COM	
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all;	
ESTRELLA TEMPRAN	0	786 370-0009	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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)
MAIL	ING ADDRESS:	STREET/COURIE	CR ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ESTRELLA Y CARLOS, LLC

ARTICLES	S OF AMENDMENT TO OF ORGANIZATION OF
ARTICLES	TO OF ORGANIZATION
ARTELLS	OF STATE OF
	To the state of
ESTRELLA Y CARLOS, LLC	The state of the s
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on 01/28/2019 and assigned
Florida document number 1.19000027762	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limit	ited 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 ADDRI	ESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	,
B. If amending the registered agent and/or registered agent and/or the new registered office addr	tered office address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
Name of New Registered Agent: New Registered Office Address:	
	Enter Florida street address
	Enter Florida street address , Florida

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>	Name	<u>Address</u>	Type of Action
MGR	ESTRELLA TEMPRANO	8460 SW 156 PL #702 MIAMI, FLORIDA 33193	B Add
			☐ Remove
			Change
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	 .	□ Remove	
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<u>ite:</u> 1	ontional) ce date, if other than the date of filing: ce date, if other than the date of filing: ce date, if other than the date of filing: ce date, if other than the date of filing: (optional) ce date, if other than the date of filing: (optional) ce date, if other than the date of filing: (optional) (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nt's effective date on the Department of State's records.
reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ted_	FEBRUARY 7TH
	Signature of a neither or authorized representative of a member

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Typed or printed name of signee

Filing Fee: \$25.00