1190000 61779

(Requ	uestor's Name)	
(Addı	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doca	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





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10 38 19-01008-038 **25.08

Amend

<u>,</u> 4 ;

COVER LETTER

Division of	Corporations				
	PARTNERS LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles	s of Amendment and fee(s) are sub	mitted for filing.			
Please return all corre	espondence concerning this matter	to the following:			
	JAMES BAKER				
		Name of Person			
	MATA & BAKER TAX (CONSULTANTS			
	-	Firm/Company			
	80 SW 8TH STREET STE 3303				
	•	Address			
	MIAMI, FL 33130				
	jim@mbtaxconsultants.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report noti	itication)		
For further information	on concerning this matter, please c	all:			
JAMES BAKER	÷1 (888) 250-8960				
Nar	ne of Person	Area Code Daytim	ne Telephone Number		
Enclosed is a check f	or the following amount:				
■ \$25.00 Filing Fee	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)		

MAILING ADDRESS:

TO:

Registration Section

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

BOSA PARTNERS LLC		<u>,</u> ,	
(Name of the Limited Linbility Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 03/04/2019	and assigned	
lorida document number L19000061779			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5555 BISCAYNE BLVD SUITE 2 SW		
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33137		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5555 BISCAYNE BLVD SUITE 2 MIAMI, FL 33137	SW	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:	-	nter the name of the r	
Name of New Registered Agent.			
New Registered Office Address:	Enter Florida street address		
	, Floric		
	City	Zip Code	

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

Title	Name	<u>Address</u>	Type of Action
MGR	CARLA BARBOSA	5555 BISCAYNE BLVD SUITE 2 SW, MIAMI, FL 33137	■ Add
			□ Remove
			□ Change
			Add
			□ Remove
			Change
			
		Remove	
		Change	
			D Add
	 	Remove	
		Change	
		Add	
		C Remove	
			Change
			
		·	Remove
			□ Change

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	- detention		(option	and)
Effective date, if other than the street of the date is listed, the date in Note: If the date inserted in this document's effective date on the	ust he specific and canno block does not meet th	e applicable statutory	or more than 90 days after fi	iling.) Pursuant to 605.0207 (
he record specifies a delay The 90th day after the re	ed effective date, cord is filed.	but not an effective	ve time, at 12:01 a.	m. on the earller of:
Dated September 27	201	9		
	1	·		
	T	r or authorized represent	-,,- · · · · · · · · · · · · · · · ·	

Page 3 of 3

Typed or printed name of signee