## L19000074314

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## COVER LETTER \_

TO: Registration Section Division of Corporations	
SUBJECT: Fajas Depot 1, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	•
Jessica Echemendia Name of Person	
Fajas Depot 1, LLC	
7931 SW 40H St #38	
Miami, FL 33155  City/State and Zip Code	
Decheneralia 300 gmail. com E-mail address: (to be used for future should report notification)	
For further information concerning this matter, please call:	
Dessica Echemendia at (186) 413 8601  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution	

MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2061 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

tajas Depot 1, L	LC
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000074314</u>	were filed on 3/18/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the new</u>
Name of New Registered Agent: UESS	ica Echemendia
New Registered Office Address: 8105	NW 164th ter
Mian	Enter Florida street address  Ni Lakes Florida 33016  City Zip Code
New Registered Agent's Signature if changing Designant Court	

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 Flanging 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 Type of Action Address Name **Title** Jacqueline Concepcion MGR □ Add 33016 16234 NW 82nd PL Miami Lakes F/ NRemove \_□ Change \_□ Add ☐ Remove ☐ Change \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change  $\square$  Add ☐ Remove

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if an effe <u>Note:</u>	re date, if other than the date of filing:
ne 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.
Dated _	March 15th 2019
	Signification of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00