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# **COVER LETTER**

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#### TO: Registration Section Division of Corporations

EUGENIO AUGUSTO MORENO MENDEZ LLC

SUBJECT: \_\_\_\_\_

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:

Eugenio Moreno

Name of Person

Firm/Company

1195 Balboa CT

Address

Weston, FL. 33326

City/State and Zip Code

e.moreno@realtyem.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### EUGENIO AUGUSTO MORENO MENDEZ LLC

#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_\_\_ and assigned \_\_\_\_\_\_\_ and assigned \_\_\_\_\_\_\_\_\_.

This amendment is submitted to amend the following:

## A. If amending name, enter the new name of the limited liability company here:

#### EUGENIO MORENO LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	202	
(Principal office address MUST BE A STREET ADDRESS)		
<u></u>	67) 	
	477	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

# B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Enter Florida street	address
	_, Florida
	Enter Florida street City

### 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			🗌 Remove
		<u></u>	□Change
			□ Add
			🗆 Remove
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			Change
			□Add

and the second second

D. If amending any other information, enter change(s) here: (Attach additional sheets. if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	August 9	2024	
_		(.AL	
		Signature of a member or authorized representative of a member	
	Eugenio Moreno		
		Typed or printed name of signee	