L19000084192

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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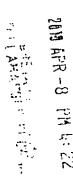


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COVER LETTER

TO: Registration Se Division of Cor		•		Q;	
SUBJECT:	Jirehoasis.	I_LC			
SUBJECT:		ted Liability Company			
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The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.		The second	•
Please return all correspo	ondence concerning this matter (to the following:		4. 0	o.
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	Davie F davis (City/State and Zip Code Carfan & Cahoc o he used for future annual report notif	314.		
For further information c	concerning this matter, please ca				
NI Canor Name o	Farfan of Person	at (954) 548- Area Code Daytime	8795 e Telephone Number		
Enclosed is a check for t	he 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 Filin Certificate Certified C (additional co	of Status &	
71	ING ADDRESS: Section	STREET/COURI Registration Section	n		
	retions	Division of Corpor Clifton Building	ations		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on ___ Florida document number L 19000084192 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 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>	<u>Name</u>	Address	Type of Action
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ian effe Note: I	we date, if other than the date of filing: 2019. (optional) etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that it is effective date on the Department of State's records.
	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.
ated _	4/5/19.
	Signature of a member of authorized representative of a member
	NICONON W FARFAN BARTOLD Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00