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APPROVED AND FILED

(C) ()(C)

COVER LETTER

	istration Section		
SUBJECT:	LAURA VEGA ROCA L.L.C		
	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:		
	Laura Vega Roca		
	Name of Person		
	LAURA VEGA ROCA L.L.C		
	Firm/Company		
	600 NW 6th H. Apt. 812	201	
	Address	2019 APR	~
	Miami, FL. 33136	PR -3	FIA
	City/State and Zip Code	• • • •	E83
	E-mail address; (to be used for future annual report notification)		ָר רַ
For further in	aformation concerning this matter, please call:	AH 10: 02	
ſ	wra Vega Roca		
	Name of Person Area Code Daytime Telephone Number		
Enclosed is a	check for the following amount:		
\$25.00 F	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	e of Status &	
	MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section		

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

(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L4900086455</u> .	y were filed on 03/28/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	submitted to amend the following: me, enter the new name of the limited liability company here: distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." al offices address, if applicable: dress MUST BE A STREET ADDRESS) address, if applicable: AY BE A POST OFFICE BOX) The registered agent and/or registered office address on our records, enter the name of the new d/or the new registered office address here: Sew Registered Agent:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L.I.C" or the abbreviation "L.IC."
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)	
	02
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
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 registered agent and/or the new registered office address Name of New Registered Agent:	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Lavia Vega Roca	600 NW 6thSt. Apt 812, Miani FL. 33136	- BAdd
			Remove
			Change
			🗆 Add
			Remove
			Change
			AND EILED BAPRE 3 ME 10: PE CREMENT OF STAR
			□ Remove
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		; <u>~</u>
	TO THE COLUMN TO	
	02	
Effec	ve date, if other than the date of filing: 63 23 2049 (optional) betive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.	
	·	
docui	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.	of:
docur the re) Th		of:

Page 3 of 3

Filing Fee: \$25.00