## 219000086396

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## **COVER LETTER**

	Registration Sc Division of Cor		,	*	
SUBJEC	-MAYA IX	COYENSE & SAN MIGUEL	LLC		
SUBJEC	1.	Name of Lin	nited Liability Company	<del> </del>	
The enclo	osed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		MARIO G VARGAS			
			Name of Person		
		MAYA IXCOYENSE & :	SAN MIGUEL LLC		
		<del></del> -	Firm/Company	<del></del>	
		2701 SWINDELL RD			
			Address		1
		LAKELAND, FL 33805			191 191
		<del></del>	City/State and Zip Code		19 MAY
		SANDRA@SKYNETPRO			-2
For furthe	r information co	E-mail address: ( oncerning this matter, please c	to be used for future annual report notifiall:	cation)	PX 12: 50
SANDRA	A BETANCOU		863 258-0599 at ()		55
	Name o	f Person	Area Code Daytime	Telephone Number	- ,
Enclosed	is a check for th	ne following amount:			
<b>\$25.0</b>	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is	tatus &

MAILING ADDRESS:

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**

ADTIC		
ARTIC	CLES OF ORGANIZATION	,
	OF	9
MAYA IXCOYENSE & SAN MIGU	JEL LLC	and assigned
	Liability Company as it now appears on our records.)  A Florida Limited Liability Company)	
(5)	Criorida Limited Liability Company)	<i>*</i>
The Articles of Organization for this Limited Lial	bility Company were filed on 03/28/2019	and assigned 🔑
Florida document number L19000086396		
This amendment is submitted to amend the follow		
A. If amending name, enter the new name of t	ho limited liability commune have	
t. If amending hame, enter the new hame of the	ne minted namity company nere:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or t	the obbaniation of T. C.
	-	ine anotestation 17.17.C.
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET	ADDRESS)	<u></u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	OX)	
	<del>-</del>	
3. If amending the registered agent and/or	registered office address on our records, er	nter the name of the n
registered agent and/or the new registered offic	<u>ce address here</u> :	
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street address	
	, Florid:	
	City	Zip Code
New Registered Agent's Signature, if changing Reg	zistered Agent:	
hereby accept the appointment as registered of	agent and agree to act in this capacity. I further	r agree to comply with t
provisions of all statutes relative to the proper	and complete performance of my duties, and I d	am familiar with and
accept the obligations of my position as registe	red agent as provided for in Chapter 605, F.S.	Or, if this document is
veing filed to merely reflect a change in the reg company has been notified in writing of this ch	gistered office address, I hereby confirm that th	e limited liability
ompany has been housed in writing of this ch	unge.	

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
AMBR	MARIA PEDRO	21089 DILLE ST	
		LAKELAND, FL 33815	
			Change
			□ Remove
			Change
			Remove
			Change
		<del></del>	
		<del></del>	□ Remove
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		<u>.</u>	
Effective date, if other than the d	ate of filing:	(opti	onal)
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable s	tatutory filing requirements, this	s date will not be listed as th
the record specifies a delayed of the poor the following t	effective date, but not an d is filed.	effective time, at 12:01 a	a.m. on the earlier of:
Dated	. 2019		
Mario Vova	ocoS .	representative of a member	
Si	gnature of a member or authorized	representative of a member	
MARIO G VARGAS			

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Filing Fee: \$25.00