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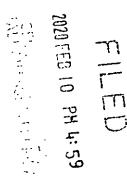
(Requestor's Name)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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Amend

MAR (1.5 2020)
I ALBRITTON

COVER LETTER

Registration Section

TO:

Division of Cor	porations			
	OS RANCH, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Davi Matos			
		Name of Person		
		Firm/Company		
	1380 Terry Ln			
		Address		
	Kissimmee FL 34744			
		City/State and Zip Code		
	davidiasmatos@gmail.com	to be used for future annual report no	titication)	
For further information c	oncerning this matter, please c	·	Michael	
Davi Matos		407 9201035 at ()		
Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	he 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)	
Mailing Address Registration		Street Address: Registration S	ection	
Division of Corporations		Division of Corporations		
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810	
ramanassee,	トレ シニンエブ	2415 (4, 141011)	of Direct Owne 010	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

__ and assigned

THE MATOS RANCH, 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 April 1, 2019	and assigned
Florida document number L19(XXX)89911		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	Hity 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)		
		<u></u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>e</u>	nter the name of the new registered
New Registered Office Address:	En an El ani la consecu	Aller
	Enter Florida street address	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent	•	,
I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my dutie provided for in Chapter (s, and I am familiar with and 605, F.S. Or, if this document is

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> <u>Address</u>	<u>Address</u>	Type of Action
AMBR	Davi Matos	1380 Terry Ln, Kissimmee FL 34744	= Add
			🗀 Remove
			□Change
MGR	Patricia Matos	1380 Terry Ln. Kissimmee FL 34744	≣ ∧dd
		1380 Terry Ln, Kissimmee FL 34744 ☐ Remove ☐ Change	
			□Change
			□Add
			□Remove
			□ Change
	Patricia Matos		□Add
			□Remove
		<u> </u>	□Change
	 		□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

					
					
					
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	 .		·		
Effective date, if other than the if an effective date is listed, the date must Note: If the date inserted in this blacement's effective date on the D	t be specific and cannot be ock does not meet the a	pplicable statutory	or more than 90 days after filling requirements, th	r filing.) Pursuant to 605,02	07+ as t
e record specifies a delayed effectived is filed.	e date, but not an effect	ive time, at 12:01 a	.m. on the earlier of: (b) The 90th day after th	œ
Dated February 7th	2020	·			
	Patricia	Parton			
	Signature of a member or	authonzed represent	ative of a member		
	Patricia	printed name of sign			

Filing Fee: \$25.00