119000106044

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		CORALS, LLC	• •	
JOBBINET.	-	Name of Lim	ited Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing	
		ndence concerning this matter	_	
		Luis J. Gonzalez		
			Name of Person	
		Current Corals, LLC		
			Firm/Company	
		410 Melanie Way,		
			Address	
		Maitland, FL 32751		
			City/State and Zip Code	
		currentcorals@outlook.com	to be used for future annual report notif	Tontion)
For further in	nformation co	oncerning this matter, please ca	· ·	ication)
Luis Gonzal			407 405-2288 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 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)

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

CURRENT CORALS, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records rida Limited Liability Company)	<u>,)</u>
The Articles of Organization for this Limited Liability	y Company were filed on April 18, 2019	and assigned
Florida document number L19000106044		and assigned
This amendment is submitted to amend the following	;	,
A. If amending name, <u>enter the new name of the l</u>	imited liability company here:	
N/A		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:	N/A	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		he name of the new regist
Name of New Registered Agent: N/A	A	
New Registered Office Address:		
	Enter Florida street address	
	Flo	
	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, 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
MGR	Colleen D.Gonzalez	410 Melanie Way	□Add
		Maitland, FL 32751	■Remove
			□Change
			□Add
			□Remove
			□Change
	·	-	Add
			□Remove
			□Remove
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N/A				
ig:		(optional)	(05.020
id cannot be prior to meet the applicable	date of filing or m le statutory filing	ore than 90 days g requirements	s after filing.) Pu s, this date wil	irsuant to 605.0207 I not be listed as
State's records.				
ot an effective time	e, at 12:01 a.m. o	on the earlier o	of: (b) The 90	0th day after the
2020				
· <u> </u>	<u>.</u> •			
member or authoriz	zed representative	of a member	<u> </u>	
1 5	d cannot be prior to meet the applicab State's records. t an effective time 2020 member or authorical	d cannot be prior to date of tiling or meet the applicable statutory filing State's records. t an effective time, at 12:01 a.m. of the control of the contr	d cannot be prior to date of tiling or more than 90 days meet the applicable statutory filing requirements. State's records. t an effective time, at 12:01 a.m. on the earlier of the control of the con	g:

Filing Fee: \$25.00