

L190000109039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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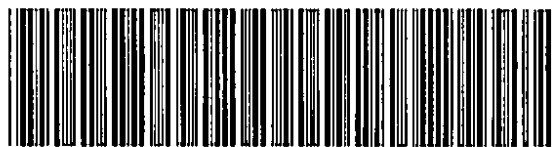
(Business Entity Name)

(Document Number)

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2022 SEP 19 AM 7:10
SOUTH CAROLINA
FALL RIVER

A. BUTLER

DEC 13 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROJAS GOMEZ SERVICES LLC

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:

LEONARDO ROJAS

Name of Person

ROJAS GOMEZ SERVICES LLC

Firm/Company

4471 NORTH FEDERAL HIGHWAY APT206

Address

POMPANO BEACH, FL 33064

City/State and Zip Code

LEONARDOROYAS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEONARDO ROJAS

954

934-5689

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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**

ROJAS GOMEZ SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 SEP 19 AM 7:10

FILED
STATE
CLERK

The Articles of Organization for this Limited Liability Company were filed on 04/22/2019 and assigned
Florida document number L19000109039.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

4471 NORTH FEDERAL HIGHWAY APT206

POMPANO BEACH, FL 33064

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4471 NORTH FEDERAL HIGHWAY APT206

POMPANO BEACH, FL 33064

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:

LEONARDO ROJAS

New Registered Office Address:

4471 NORTH FEDERAL HIGHWAY APT206

Enter Florida street address

POMPANO BEACH

, Florida 33064

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>	<u>Address</u>	<u>Type of Action</u>
MGR	PATRICIA ROJAS GOMEZ	9769 ARBOR OAKS LANE APT108	<input type="checkbox"/> Add
		BOCA RATON, FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LEONARDO ROJAS	4471 NORTH FEDERAL HIGHWAY APT206	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL 33064	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

N/A

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 15 2022

X Leonardo Rojas

Signature of a member or authorized representative of a member

LEONARDO ROJAS

Typed or printed name of signee

Filing Fee: \$25.00