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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	ECT:	iver - Guzm Name of Lim	an LLC	
301.		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Evelyn 1	Muntalus Name of Person	
		Diversiti	Firm/Company	od & Services Inc.
	·	P.D. Bo	Address	
		Lehig	Lacres fe 33 City/State and Zip Code	970-0812
		~ ~	0 be used for future annual report notifi	
For fur	ther information co	oncerning this matter, please ca	all:	
<u></u>	Delyn Name of	Montalus Person	at (954) 990 Area Code Daytime	Telephone Number
^		e following amount:		
\$2.	5.00 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section in of Corporations ox 6327 ssee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n utions uter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF **OLIVER-GUZMAN LLC**

The Articles of Organization for this Limited Liability Company were filed on 5/01/2019 and assigned Florida document number L19000119046.

This amendment is submitted to an	mena the following:	
A. If amending name, enter the r	new name of the limited liability company her	e:
The new name must be distinguish	able and contain the words "Limited Liability C	—— Company," the
designation "LLC" or the abbreviat	·	
Enter new principal offices address	, if applicable: 18995 SW 169 AVENUE, MIAN	ЛI, FL 33187
Enter new mailing address, if applications	cable: 18995 SW 169 AVENUE, MIAMI, FL 33	3187
		2019 SEC FALL
	and/or registered office address on our record	ds, enter the name of -
the new registered agent and/or t	the new registered office address here:	728 F
New Registered Office Address	18995 SW 169 AVENUE, MIAMI, FL 33187	3
new negistered office Address.	10333 344 103 AVEROC, WINNING, FE 3310/	99

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

CHANGE ADDRESS:

MARIA OLIVER, MGR

18995 SW 169 AVENUE, MIAMI, FL 33187

CARLOS OLIVER, MGR 18995 SW 169 AVENUE, MIAMI, FL 33187

E. Effective date, if other than the date of filing:	(optional
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(If an effective 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 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated: MAY 17, 2019.

Signature of a member or authorized representative of a member

MARIA OLIVER

Typed or printed name of signee