## 119000 124586

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000336770890

11/18/19--01011--017 \*\*25.00

Amend

DEC 13 7019

I ALBRITTON

## **COVER LETTER**

Division of C	orporations		
SUBJECT:	INVERSIONES MRUM	MEL LLC	
NOBINCT.	Name of Lin	ited Liability Company	
The enclosed Articles of	of Amendment and feets) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	1	MARIA RUMMEL	
	<del> </del>	Name of Person	
		Firm/Company	
	1000 NW 80TH CT APT	2433	
		Address	
	MIAMI LAKE, FL, 3301	6	
		City/State and Zip Code	
		JESUSCHAVEZ1983@GMA	
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
MARIA RUMMEL		786 8282178	
Name	of Person	at ()	ne 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)
MAI	LING ADDRESS;	STREET/COUR	IER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

INVERSIONES MRUMMELLLC

(Name of the Lin	nited Liability Company as it now appear (A Florida Limited Etability Company)	s on our records.)
The Articles of Organization for this Limited Florida document number L 19000124586	Liability Company were filed on	AY 07, 2019 and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company ho	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company." the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
		<u> </u>
Inter new mailing address, if applicable:		-
Mailing address MAY BE A POST OFFICE	<u> </u>	
	<del></del>	***
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		our records, enter the name of the
	9731 SW 213TH TER	
New Registered Office Address:		ida street address
	CUTLEY BAY	
	Cur	, Florida 33189 Zip Code
New Registered Agent's Signature, if changing	•	Eq. Code

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. 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	MARIA, RUMMEL	1000NW 80TH CT APT 2433	
		MIAMI LAKE, FL 33016	П 0
			Change
MGR	JESUS E., CHAVEZ	9731 SW 213TH TER	
		CUTLEY BAY , FL 33189	
			Change
			Add
			□ Remove
		□ Change	
			Remove
<del></del>			
			Remove
			□ Change
			□ Remove
			☐ Change

ADD TO MGR JESUS E., CHAVI	ΞZ				
184		· · · · · · · · · · · · · · · · · · ·			
	<del></del>	<del></del>			
<del>-</del>					
160		<u> </u>			_
	-				
	<del></del>				
				<del></del>	
· · · · · · · · · · · · · · · · · · ·	<del></del>		-		
ective date, if other than the date of effective date is listed, the date must be speci e: If the date inserted in this block does ument's effective date on the Department	fic and cannot be not meet the ap	plicable statutor	g or more than 90 days	optional) safter filing.) Pursuant t s. this date will not be	o 605.02 c listed
record specifies a delayed effect he 90th day after the record is f	ive date, but îled.	not an effeci	tive time, at 12:	01 a.m. on the e	arlier
NOV 13,	2019				
	-( )	$\overline{}$	)		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00