

419000157253

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PEDRO LUZQUINOS
Account Number : 120170000042
Phone : (954) 656-8413
Fax Number : (954) 432-6807

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: PLUZQUINOSOFF@HOTMAIL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MEGAHIERRO LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Corporate Filing Menu

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M. SOLOMON

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July 19, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MEGAHIERRO LLC
8670 TAFT STREET
PEMBROKE PINES, FL 33024

SUBJECT: MEGAHIERRO LLC
REF: L19000157253

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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Agnes Lunt
Regulatory Specialist III

FAX Aud. #: H19000217224
Letter Number: 019A00014719

P.O BOX 6327 - Tallahassee, Florida 32314

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEGAHIERRO 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:

PEDRO LUZQUINOS

Name of Person

Firm/Company

8670 TAFT STREET

Address

PEMBROKE PINES, FL 33024

City/State and Zip Code

PLUZQUINOSF@HOTMAIL.COM

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

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DIVISION OF STATE
CORPORATIONS

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For further information concerning this matter, please call:

PEDRO LUZQUINOS

954 655-8413
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

H19 000 21 72 24 3

1 >> 2 1 2 2 4 3
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

MEGAHIERRO 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 06/24/2019 and assigned
 Florida document number L19000157253.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

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 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

1419 000 2172 243

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 CLERK OF CIRCUIT COURT
 1ST JUDICIAL CIRCUIT
 IN AND FOR THE COUNTY OF DALLAS, TEXAS

2019-07-19 00:18 PEDRO

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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>
AMBR	BELANDRIA PEREZ, ERIB J	9670 TAFT STREET	☐ Add
		PEMBROKE PINES, FL 33024	☒ Remove
			☐ Change
MGR	LUZQUINOS, PEDRO J	8670 TAFT STREET	☒ Add
		PEMBROKE PINES, FL 33024	☐ Remove
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Dated JULY 18 2019

Signature of a member or authorized representative of a member

PEDRO J. LUZQUINOS

Typed or printed name of signee

419 000 2172243