

L19 000 161637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

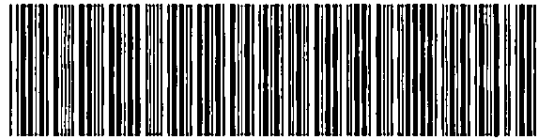
(Business Entity Name)

(Document Number)

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2021 JUL 26 PM 1:03
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BY BRUCE
AUG 07 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAPITOLGY 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:

ALEJANDRA VILLAR

Name of Person

CAPITOLGY LLC

Firm/Company

88 SW 7TH ST #1712

Address

MIAMI, FL 33130

City/State and Zip Code

INFO@CAPITOLGYLLC.COM

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

For further information concerning this matter, please call:

ALEJANDRA VILLAR

786 307-0509
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

2021 JUN 26 PM 1:04
TALLAHASSEE, FL
FBI

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

CAPITOLOGY 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 06/28/2019 and assigned
Florida document number L19000161637.

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:

JUAN C. SIKAFFY

New Registered Office Address:

88 SW 7TH ST #1712

Enter Florida street address

MIAMI

City

Florida 33130

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>
AMBR	JUAN C. SIKAFFY	88 SW 7TH ST #1712	☐ Add
		MIAMI, FL 33130	☐ Remove
			☒ Change
MGR	ALEJANDRA L. VILLAR	4934 NW 94TH DORAL PL	☐ Add
		MIAMI FL, 33178	☐ Remove
			☒ Change
MGR	ALEJANDRO DAVID LEAN	4934 NW 94TH DORAL PL	☐ Add
		MIAMI FL, 33178	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2019 JUL 6 PM 1:01
MILLER
CITY OF MIAMI
OFFICE OF THE
COMPTROLLER
OF PUBLIC
WORKS

2021 JUL 26 PM 1:11
FALL

2021 JUN 26 PM 1:04

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 07/19, 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00