# 119000167353

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	Address)
(	Address)
	City/State/Zip/Phone #)
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

INGAPER ENGINEERING SERVICES LLC SUBJECT: 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: Gabriel Diaz Name of Person GDC & Associates Firm/Company 801 NW 47 Ave W-201 Address Miami Fl 33125 City/State and Zip Code gabrielconsulting15@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gabriel Diaz 7690462 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, **■** \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>L19000167353</u>	ity Company were filed on 06/26/2019 and assigned and assigned	i
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter the nameof the</u> <u>address here</u> :	<u>ie nev</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
-	City Zip Code	

### New Registered Agent's Signature, if changing Registered Agent:

INGAPER ENGINEERING SERVICES LLC

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>	Address	Type of Action
MGR	ZERPA SOLORZANO, CESAR O		
		10935 SAVANNAH LANDING CIR ORLANDO, FL 32832	■ Remove
			☐ Change
MGR URIEL JESUS PEREZ CEBALLOS		10935 SAVANNAH LANDING CIR ORLANDO, FL 32832	Add
			☐ Remove
			☐ Change
			□ Add
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If an el Note:	fective date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	17th of 5leg . 2019.
	Close Toll of the
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00