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COVER LETTER

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erin rezer	вом вас	ILA & HELM INVESTMENT	'S LLC	·
SUBJECT		ILA & HELM INVESTMENT Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		TJ AMERICA BUSINES	S LLC	
			Name of Person	
		LJ AMERICA BUSINES	S LLC	
			Firm/Company	
		1163 JAMES PAUL RD		
			Address	
		DAVENPORT, FL 33837		
			City/State and Zip Code	
		info.a,tjamericabusiness.com	n to be used for future annual report no	all-line ()
For further	information o	oncerning this matter, please c		arreaton)
ТШАСО 2	ARCE		332 455-8146	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is	a check for th	ne 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)
	ailing Addres		Street Address: Registration S	ection
D	ivision of C	orporations	Division of Co	orporations
	O. Box 632 Illahassee, I		The Centre of 2415 N. Monr	Tallahassee oc Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOMBACILA & F	IELM INVESTMI	ENTS LLC
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

1163 JAMES PAUL RD

DAVENPORT, FL 33837

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Name of New Registered Agent:	LJ AMERICA BUSENESS LI	A
New Registered Office Address:	1163 JAMES PAUL RD	
	Enter 1	Florida street address
	DAVENPORT	. Florida ³³⁸³⁷
	City	Zip Code

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

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	FABIO ADAM HELM	1163 JAMES PAUL RD, DAVENPORT FL 33837	DAdd
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		-	□Remove
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If the date inserted in this ment's effective date on the	must be specific and cannot be prior to da block does not meet the applicable Department of State's records.	statutory filing requirements, thi	s date will not be listed as the
d specifies a delayed effect led.	tive date, but not an effective time, i	at 12:01 a.m. on the earlier of: ()	o) The 90th day after the
July, 10	2024		
	Signature of a member or authorized	d representative of a member	<u></u>
	IACHA II	DK-1	
RICARDO GAMA B	TACILA (/, "MANYA) (A)	/ hr.1/2	