## L19000 195 428

(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



500335295175

19/19/18--01013--007 \*\*80.00

2315 P. 17 10 PH 12: 1,3

R WHITE OCT 29 2019

## COVER LETTÈR

Div	ision of Cor	porations		
SUBJECT:	Llompart (	JS LLC		
object.		Name of Lim	ited Liability Company	
he enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Andres Villalpando		
		Liompart US LLC	Name of Person	
		6503 Raham Ct	Firm/Compuny	
		Port Orange, Florida 32128	Address	
		andresvillalpando@gmail.co	City/State and Zip Code	<del></del>
Una faathaa (c	a Commention of		to be used for future annual report notifi	cation)
Andres Villa		oncerning this matter, please or	386 2902301	
Name of Person		f Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for the	he following amount:		
□ \$25.00 F	iling 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:

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 

Liompart US LLC

company has been notified in writing of this change.

2019 007 10 PM 12: 43

(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 w	vere filed on July 31, 2019	and assigned	
Florida document number L19000195428			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company here:		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the a	bbreviation "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 registered agent and/or the new registered office address here:		the name of the nev	
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:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	erformance of my duties, and I am	familiar with and	

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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
			□ Add
			□ Remove
			Change
<del></del>			
			☐ Remove
			☐ Change
<del></del>			Add
			☐ Remove
		<del></del>	Change
	<del></del>		□ Add
			□ Remove
		<del></del>	Add
			☐ Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	
			☐ Remove
			☐ Change

Maria Antonia Llompart: 35 %	(Thirty five percent)			
Jose Eugenio Joel Valencia: 3	35% (Thirty five percent)		<u>,                                    </u>	
Jose Sebastian Valencia: 30%	6 (thirty percent)			
		· ·	· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·	
		<del></del>		
	***	<u> </u>		
•	·		· ·	
-		<del></del>		<del></del>
				****
				· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·				
Offective date, if other than the	data of filings		(optiona	<b>.</b>
I an effective date is listed, the date mus	t be specific and cannot be pri-		nore than 90 days after filin	g.) Pursuant to 605,0207 (
Note: If the date inserted in this blocument's effective date on the De			ig requirements, tins dat	e will not be fisted as t
e record specifies a delayed The 90th day after the reco		ot an effective t	time, at 12:01 a.m	. on the earlier of:
	2019			
October 08				
Dated October 08	··	· ·		
Dated October 08	LULL Signature of a member or aut	horizad conpountation	o o l'a munihar	

Page 3 of 3

Filing Fee: \$25.00