

419000210074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

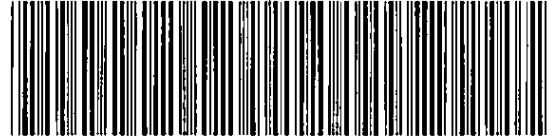
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

TO: Registration Section  
Division of Corporations

THE GREENSHAPE COMPANY 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:

Rodrigo Zuloaga

\_\_\_\_\_  
Name of Person

THE GREENSHAPE COMPANY LLC

\_\_\_\_\_  
Firm/Company

560 Village Blvd Suite 280

\_\_\_\_\_  
Address

West Palm Beach / FL 33409

\_\_\_\_\_  
City/State and Zip Code

rzuloaga@thegreenshape.com

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

For further information concerning this matter, please call:

Rodrigo Zuloaga                      561              9894070  
\_\_\_\_\_  
Name of Person                      at (              )                      Daytime Telephone Number  
Area Code

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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SECRETARY OF STATE  
TALLAHASSEE, FL

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

THE GREENSHAPE COMPANY 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 08/23/2019 and assigned  
Florida document number L19000210074.

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*

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City 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**

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2019 AUG -6 PM 4:05  
CLERK OF DISTRICT COURT  
NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

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>
MGR	Alfonso Machado	560 Village Blvd Suite 280	<input type="checkbox"/> Add
		West Palm Beach, FL 33409	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Rodrigo Zuloaga	560 Village Blvd Suite 280	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33409	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Eduardo Sacco	560 Village Blvd Suite 280	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33409	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove

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2016 AUG 6 PM 4:55  
STATE OF FLORIDA  
TALLAHASSEE, FL

[illegible]

**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 July 31st, 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee

2024 AUG -6 PM 4:55  
SOD. NATY OF STATE  
TALLAHASSEE, FL

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**Filing Fee: \$25.00**