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COVER LETTER

	Registration Se Division of Cor			
CUDIC		CIA INSURANCE LLC		
SOBJEC	CT:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
			Name of Person	
			Firm/Company	
		8923 W Okaland park Blvd	Address	
		Sunrise Fl 33351	. radicas	
			City/State and Zip Code	
		caridad.rio@estrellainsuran		
For furth	er information c	E-mail address: (oncerning this matter, please co	to be used for future annual report no all:	otilication)
	er Rizo Canino	, ,	305 9882024	
	Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed	is a check for the	ne following amount:		
≡ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration		<u>Street Address:</u> Registration S	Section
	Division of C		Division of C	orporations
	P.O. Box 632		The Centre of	Tallahassee roe Street, Suite 810
	Tallahassee,	FL 32314	2410 N. MON	ioc succi, suite o iv

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIZO-GARCIA INSURANCE LI				
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	<u>:ords.</u>)	
The Articles of Organization for this Limited I	_iability Company	were filed on	and assigned	
lorida document number L19000212876				
'his amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	oility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "f	LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	Alexander Rizo Canino		
Principal office address MUST BE A STRE		8923 W Oakland park Blvd	- • • · · ·	
Trincipal Office and compression to		Sunrise Fl 33351	5	
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	E ROY)		2: (
Maning dauress MAT BE A 1 051 011 1CE	<u>. 100.17</u>			
3. If amending the registered agent and/or gent and/or the new registered office addr			ter the name of the new regi	
Name of New Registered Agent:	Alexander Kize			
	8923 W Oaklar	nd Park blvd		
Name of New Registered Agent: New Registered Office Address:		nd Park blvd Enter Florida street ad	dress	
		Enter Florida street ad	Herida 33351 Zip Code	

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	Caridad Garcia Garcia	8923 w Oakland Park Blvd	Sunrise fl 33351	= Add
				Remove
				□Change
				□Add
			·	□Remove
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		07/01/2024			
Tective date, if other the effective date is listed, the oter. If the date inserted incument's effective date in the effective date in the effective date.	date must be specific n this block does n	ling: and cannot be prior to ot meet the applical	date of filing or more ble statutory filing r	(optional) than 90 days after filing equirements, this date	Pursuant to 605.0207 will not be listed as
edment's effective date	on the Department	or state's records.			
record specifies a delayed is filed.	effective date, but	not an effective tin	ne, at 12:01 a.m. on	the earlier of: (b) Th	e 90th day after the
ated		2024	_ •		
ated					
		of a member of author	ized representative of	a member	