

# L19000234400

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

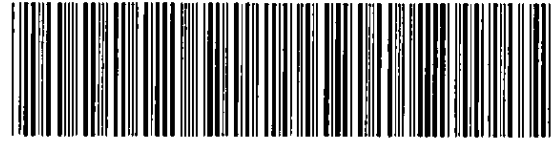
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024-11-4 PM 5:22

10/22/2024

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: THE CHIMI SPOT LLC

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:

Andres O. Gonell Morel

Name of Person

THE CHIMI SPOT LLC

Firm/Company

3900 S GOLDENROD RD, Suite 136

Address

Orlando, FL 32822

City/State and Zip Code

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

For further information concerning this matter, please call:

Juan C. Burgos, Esq

Name of Person

at ( 407 ) 505-4190

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

**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



JUAN C. BURGOS  
ATTORNEY & COUNSELOR AT LAW  
Law Offices of Juan C. Burgos, P.L.

September 27, 2024

SENT VIA PRIORITY MAIL  
WITH DELIVERY CONFIRMATION:  
9 9405503699300714767472

FLORIDA DIV OF CORPORATIONS  
Registration Section  
PO Box: 6327  
Tallahassee, FL 32314.

Re: THE CHIMISPOT, LLC

**ACTION / RESPONSE REQUESTED**

To whom it may concern,

Attached to this letter please find Cover Letter, and executed documents for amendments to the articles of incorporation for THE CHIMISPOT, LLC (L19000234400). I am attaching the required forms and the documents needed to make possible the amendments. I am also enclosing the required \$50.00 check to cover the associated fee. If you have any questions, please contact me at your earliest convenience.

Thank you for your anticipated attention regarding this matter.

Cordially,

  
\_\_\_\_\_  
Juan C. Burgos  
Attorney and Counselor at Law

EnclosuresUCB

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

2024 OCT -4 PM 5:22

~~THE CHIMI SPOT~~

THE CHIMI SPOT 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 09/17/2019 and assigned Florida document number L19000234400.

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: Andres O. Gonell Morel.

New Registered Office Address: 3900 S GOLDENROD RD, Ste # 136

*Enter Florida street address*

Orlando

*City*

Florida 32824

*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

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>
MBR	ARMANDO J. PAREDES FERMI	3900 S GOLDENROD RD. Ste 136	<input type="checkbox"/> Add
		Orlando, FL 32822	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Maicor E. Cepeda Garcia	331 Grouper Dr	<input checked="" type="checkbox"/> Add
		Poinciana, FL 34759	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Filing Fee: \$25.00**