L19000253700

(1	Requestor's Name)
(,	Address)
(.	Address)
	City/State/Zip/Phone #)
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	Document Number)
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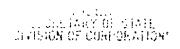
COVER LETTER

MARIA TIN	NOCO LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	MARIA TINOCO		
		Name of Person	
	MARIA TINOCO LLC.		
		Firm/Company	
	1402 WEST HIGHLAND	STREET	
	<u> </u>	Address	
	LAKELAND, FL. 33815		
		City/State and Zip Code	
	MALDONADO_SOLUTIO	NS@OUTLOOK.COM to be used for future annual report notif	
For further information co	r-mair address, to preerning this matter, please of		icanon)
MARIA TINOCO		863 709-6047	
Name of			* Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 MAR 22 AH | |: 20

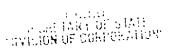
MARIA TINOCO LLC.			
(Name of the Limited L. (A F	iability Company as it lorida Limited Liability	now appears on our records.` Company)	,
The Articles of Organization for this Limited Liabil Florida document number L19000253700	ity Company were fi	led on 10/08/2019	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, <u>enter the new name of the</u>	limited liability co	mpany here:	
The new name must be distinguishable and contain the words	"Limited Liability Com	pany," the designation "LLC" (or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	::		
Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or regis agent and/or the new registered office address he		s on our records, <u>enter tl</u>	ne name of the new registo
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street address	
		Flor	
	Cit	ì.	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 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



21 MAR 22 AM 11: 20

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARIO CHAVEZ	1402 WEST HIGHLAND STREET	□ Add
		LAKELAND, FL. 33815	≣Remove
			© Change
			□ Add
			□ Remove
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If amending any other informat	04 1110 0
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<u> </u>	
Effective date, if other than the off an effective date is listed, the date most Note: If the date inserted in this blo document's effective date on the De	date of filing: 03 18 202 (optional) the specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 neck does not meet the applicable statutory filing requirements, this date will not be listed as spartment of State's records.
e record specifies a delayed effective rd is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	2021
March 18	
-	
Ju - D	Tiera
Ju - D	Signature of a member or authorized representative of a member

Filing Fee: \$25.00