## U9000260282

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## COVER LETTER

TO: Registration Se Division of Cor				
	· Nous - Kuar	Livited liability	Oour may	
SUBJECT:	Name of Lim	Limited Liability	Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	olod L	evolo Rivera		
	Hoy	Como Agar		
		Firm Company Company		
	3460 NO	u ast		
		Address		
	. 0 .	· II 22125		
	Mar	mi FL, 33 (2-5 City/State and Zip Code		2,
		varaines two nt le. c		,
	E-mail address: (	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
X loss and	An Division	305 6404	<b>カンチ</b>	•
Name o	f Person	at ( <u>305</u> ) <u>649</u> 4 Area Code Daytin	ne Telephone Number	,
				C
Enclosed is a check for the	ne following amount:			
\$25.00 Filing Fee	S30.00 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 Addres	ζ.	Street Address:		
Registration 5		Registration Sc		
Division of Corporations		Division of Co The Centre of	-	
P.O. Box 632 Tallahassee, l			oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as (A Florida Limited Liability Company as	ability Company
(A Florida Limited Liabili	ty Company)
The Articles of Organization for this Limited Liability Company were	filed on 10/16/2019 and assigned
Florida document number L 19000260281	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	impany," 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)	
	. '
	(, N
<ol> <li>If amending the registered agent and/or registered office addressent and/or the new registered office address here:</li> </ol>	ess on our records, <u>enter the name of the new registers</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	ity Zin 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>	Name	Address	Type of Action
AM	NAVARRO RALPH		□Add
		3460 NW 75T Hlami FL 33 D	T KRemove
			□Add
			Remove
			□Change
			□Remove
			Change
			□Add ``
			□Remove
			Change
			□Add
			□Remove
			Change
			🗖 Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 7/6/2023 \_\_\_ (optional) (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) 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Filing Fee: \$25.00

Signature of a member or authorized epresentative of a member

Typed or printed name of signee