## 119000263920

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(City/State/Zip/Phone #)
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## **COVER LETTER**

**Registration Section** 

**Division of Corporations** 

TO:

IGNACIO SUBJECT:	FERRO LLC		•			
SUBJECT:	Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	RODRIGO L CASTAÑO					
Name of Person						
IGNACIO FERRO LLC Firm/Company						
Firm/Company						
	7925 NW 12TH ST 109					
Address						
	DORAL, FL, 33126					
		City/State and Zip Code	<u> </u>			
	joaquin@consultingfirstche		ئـ 			
	E-mail address: (	to be used for future annual report notifica	ation)			
For further information of	concerning this matter, please c	all:	5			
JOAQUIN G NAVARRO		385 2083393	12			
Name of Person			'elephone Number			
Enclosed is a check for the	ne 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 S Division of C	Section	Street Address: Registration Secti Division of Corpo				
P.O. Box 632	•	The Centre of Tal				
Tallahassee. 1	FL 32314	2415 N. Monroe S	Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IGNACIO FERRO 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 October 21, 2019 and assigned Florida document number L19000263920 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 "LLC." 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: FCC CONSULTING LLC Name of New Registered Agent: 6815 BISCAYNE BLVD STE 103132 New Registered Office Address: Enter Florida street address

## 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.

City

MIAMI

If Changing Registered Agent, Signature of New Registered Agent

, Florida 33138
Zip Code

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	JUAN I FERRO PAZOS	7925 NW 12TH ST 109	□Add
		DORAL, FL, 33126	≣Remove
			□Change
AMBR	RODRIGO L CASTAÑO	6815 BISCAYNE BLVD STE 103132	≣Add
		MIAMI, FL 33138	□Remove
			□Change
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n effective date, if other than the neffective date is listed, the date munite: If the date inserted in this b	st be specific and cannot	t be prior to date of	filing or more than 90 da	ve after filing \ Pur	suant to 605.020
cument's effective date on the D	epartment of State's	records.	nory ming requiremen	ns, this date will	not be fisted a
ecord specifies a delayed effectivis filed.	e date, but not an eff	fective time, at 12	:01 a.m. on the earlie	r of: (b) The 90	th day after th
July 10th	202	23			
ited	, <del></del> _	<del></del> -			
			resentative of a member		

Filing Fee: \$25.00