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## COVER LETTER

TO: Registration S Division of Co		
ALEX S	ANCHEZ DESIGNER, LLC	•
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please return all correspondent	ondence concerning this matter	to the following:
	FRANCY RODRIGUEZ	
		Name of Person
	ATC PROFESSIONAL	SERVICES, INC
	<del></del>	Firm/Company
	3645 WEST 16TH AVE	NUE
		Address
	HIALEAH, FL 33012	
		City/State and Zip Code
	f.rodriguez.atc@hotmail.c E-mail address: (	(to be used for future annual report notification)
For further information of	concerning this matter, please c	ralt:
FRANCY RODRIGU	EZ	786 275-4310
Name o	of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	he following amount:	
\$25.00 Filing Fee	☐ \$30.00 Filing Fec & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

company has been notified in writing of this change.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALEX SANCHEZ DESIGNER, LLC		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company  Florida document number	were filed on11/26/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2(7)
(Principal office address MUST BE A STREET ADDRESS)		
		224
		· o
Enter new mailing address, if applicable:		70
(Mailing address MAY BE A POST OFFICE BOX)		
(muning unuress mm 2 Servings - Constitution of the constitution o		80
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the i	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office (Radion).	Enter Florida street address	
	, Florida	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office	performance of my duties, and 1 or provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

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	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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			Remove
			□ Changa

;	and membership interests that h	ne owns in ALEX SANCHEZ DESI	GNER LLC, to Juan Sebastian Arias Gil.
_	The ownership of the right	s and membership interests over AL	EX SANCHEZ DESIGNER LLC, are:
	Edgar A Sanchez Ramirez	owns 50%	Docusigned by:
_	Juan Sebastian Arias Gil o	wns 50%	-862F98FFC673456
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(If an effect Note: I	We date, if other than the date of the date is listed, the date must be if the date inserted in this block on the defective date on the Depart	specific and cannot be prior to date of tili does not meet the applicable statuto:	(optional)  ng or more than 90 days after filing.) Pursuant to 605.0207 ( ry filing requirements, this date will not be listed as t
he record ord is file		ate, but not an effective time, at 12:0	i a.m. on the earlier of: (b) The 90th day after the
Dated _	December 28	2020	
		DocuSigned by:	
			entative of a member

Filing Fee: \$25.00