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C. GOLDEN MAR 1 4 2020

COVER LETTER

TO:	Registration Sec Division of Corp	
SUBJI	rct.	Capsule Mark LLC:
,	<u> </u>	Name of Limited Liability Company
The er	nclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please	return all correspor	idence concerning this matter to the following:
		Pedro Enrique Oliveres Menteagede
		Capsule Hark LLC Firm/Company
		14201 SW 267 TH St Apt # 305
		Hemestead Florica, 33032 City/State and Zip Code
		City/State and Zip Code Padre Chieres 551 & ymail. Com E-mail address: (to be used for future annual report notification)
		E-mail address: (to be used for future annual report notification)
For fu	rther information co	neerning this matter, please call:
Pec	Le Enrique Name of	Person Acade at (786) - 600 + 5367 Area Code Daytime Telephone Number
Enclos	sed is a check for the	e following amount:
□ \$2	25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy tadditional copy is enclosed) Certified Copy tadditional 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

Capsule Mark LLC 2020 FFD 24 PK 1:15
(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 <u>January</u> , 13, 2020 and assigned
Plorida document number <u>L 2000019342</u> .
his amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
he new name must be distinguishable and contain the words "Limited Liabitity 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)
3. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new register</u> gent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
Florida

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

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
AMBR	Pedre Enrique Cliveres Honteagudo	14201 su 267 1# St Apt # 30	<u>S</u> □Add
	Clivarés Montéagudo	Homestead, FL 33032	□Remove
			🗷 Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
	_		DChange
			DAdd
		·	□Remove
			□Change
			□Add
			□Remove
			□Change

	Specification I would like to Amend Article IV of
_	the Articles of my organization.
<u> </u>	Reason: My provided information states my name as
=_	Fedre F C'livaries HOWEVEF me I would like
_	for this to be changed to my full Legal name which
	S
_	Pedro Enrique Olivares Monteagudo
_	
_	
_	
_	
	e date, if other than the date of filing: (optional)
	ctive 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 605.020 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
eume	nt's effective date on the Department of State's records.
ecord	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
is file	
	February, 14 2020.
nea _	
	I Stall fill
	Construction of the second contract of the con
	Signature of a member or authorized representative of a member Pidre Enrique Olivares Montgaquile

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00