

6/2/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MARILI CANCIO JOHNSON P.A.
Account Number : 120160000073
Phone : (305)967-6329
Fax Number : (305)470-7453

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: MARILI.CANCIO@CTELAW.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AURALENA INVESTMENTS LLC

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Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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FLORIDA DEPT OF STATE
TALLAHASSEE, FL 32399

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AURALENA Investments
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marli Cancio Johnson
Name of Person
Marli Cancio Johnson PA
Firm/Company
150 SE 2nd Av #1408
Address
Mi. cm: FL 33131
City/State and Zip Code
MARLI. CANCIO @ CJEIAWS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marli Cancio at 786 802-2332
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

AURALENA Investments 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 2/4/2020 and assigned
Florida document number L20000041424.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DON GOYO LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

150 SE 2nd Av #1408
Miami FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

150 SE 2nd Av #1408
Miami FL 33131

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:

Name of New Registered Agent:

New Registered Office Address:

150 SE 2nd Av #1408

Enter Florida street address

Miami, Florida 33131

City

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Alexandra Oliveros</u>	<u>150 SE 2nd Av 1408</u>	<input checked="" type="checkbox"/> Add
		<u>m.m. fl 33131</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Jose Leonardo Albanese</u>	<u>150 SE 2nd Av 1408</u>	<input checked="" type="checkbox"/> Add
	<u>Santos</u>	<u>m.m. fl 33131</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Jose A Oliveros More</u>	<u>150 SE 2nd Av 1408</u>	<input type="checkbox"/> Add
		<u>m.m. fl 33131</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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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.

Mar. I. Cencu ARZ
Typed or printed name of signer