

K20 000043032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Signature

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02/16/2022 12:00 PM

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2022 MAR 21 PM 3:24
CLERK OF SUPERIOR COURT
JULIA M. BROWN

Name Change

MAY - 3 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eloquent Copy LLC
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:

Luisa Aparisi-Franca

Name of Person

Eloquent Copy LLC

Firm/Company

13155 Ixora Ct. Apt 806

Address

North Miami, FL, 33181

City/State and Zip Code

lapafranca@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luisa Aparisi-Franca

at (305) 733-1866

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

2022 MAR 21 PM 3:24

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAR 21 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FL

March 9, 2022

LUISA APARISI-FRANCA
ELOQUENT COPY LLC
13155 IXORA CT., APT 806
NORTH MIAMI, FL 33181

SUBJECT: ELOQUENT COPY LLC
Ref. Number: L20000043032

We have received your document for ELOQUENT COPY LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 022A00005634

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Eloquent Copy 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 02/05/2020 and assigned
Florida document number 120000043032

This amendment is submitted to amend the following:

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

Fita 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)

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

MGR = Manager
AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (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.

Dated February 10th, 2022

Luigi Garini - Franga

Signature of a member or authorized representative of a member

Luisa Aparisi-Franca

Typed or printed name of signee