Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000730903)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SICONT ENTERPRISES OF AMERICA INC

Account Number : I20160000041 : (407)443-8973 Phone Fax Number : (407)930-2626

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

Ema11	Address:						
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **KELY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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84157

## COVER LETTER

TO: Registration S Division of Co			
KELY LL	.C		•
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	DESIREE TORRES		
		Name of Person	<del> </del>
	SICONT ENTERPRISES	OF AMERICA INC	
		Firm/Company	
	13574 Village Park Dr. Ste	2. 250	
		Address	
	Orlando, Fl 32837		
		City/State and Zip Code	
	sunbiz.sicont@hotmail.com	to be used for future annual report no	tification)
For further information	concerning this matter, please c		·
DESIREE TORRES		407 443-8973 at ()	
Name	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

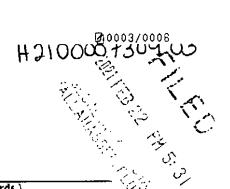
Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



KELY LLC		s on our records
(Name of the Lim)	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited I Florida document number L20000053822	Liability Company were filed on 02/	17/2020 and assigned
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name o	of the limited liability company he	<u>re</u> :
The new name must be distinguishable and contain the Enter new principal offices address, if application of the Anthropology of the Anthropology of the Enter new principal office address MUST BE A STREET	cable:	signation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	<del>-</del>	ecords, enter the name of the new registered
Name of New Registered Agent:	PAULA QUIJANO COSSIO	
New Registered Office Address:	1318 MONTGOMERY BELL RE	
<del>-</del>		ida street address
	WESLEY CHAPEL City	, Florida 33543
	Ψ",	=

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.

Paula Quijano

If Changing Registered Agent, Signature of New Registered Agent

02/22/2021 4:07PM FAX 4079252826 sicont enterprises of am HJ1000 73 0903 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	Roberto Torres Beldarrain	1408 SunnyHills Dr	
		Brandon, Fl 33510	⊟Add
			□Change
			□Add
			□ Remove □ Change □ Change
			□ Remove
			□Change
<del></del>			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□ Re:nove
			□ Change

	any real estate investment activity; janitorial services; and any other lawful business
	of America and the State of Florida.
The EIN is 84-5157587	
	<u> </u>
tive date, if other than the diffective date is listed, the date must lead the date inserted in this blockment's effective date on the Dep	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 ck does not meet the applicable statutory filing requirements, this date will not be like.
rd specifies a delayed effective iled.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
February 22	Paula Quijano

Filing Fee: \$25.00

H210000730903