## LZ0000073048

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400350363064

08/17/20--01028--020 \*\*25.00

229 ACS 17 KH 9: 16

C

## **COVER LETTER**

tion of the contract

Tallahassee, FL 32314

TO:

TO: Registration Se Division of Con			
SUBJECT:	Name of Lim	CUT-HO L	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Ma de</u>	•	cia Ganzalez
	-	Firm/Company	<del></del>
	4253 5	Ferdon B	olvd
	Cresture Lessicos	City/State and Zip Code  Si 573@ Amail to be used for future annual report notifi	2536 cation)
For further information c	oncerning this matter, please ca	all:	
Jessica Name o	SoliS (Person	at ( <u>C50</u> ) <u>737</u> Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
<b>¾</b> \$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 Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Sect Division of Corp The Centre of Ta	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF 2270 AU - 17 AU 9: 16

(Name of the Limi	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited L	iability Company were filed on May Ch 5, 200 and assigned
This amendment is submitted to amend the foll	owing:
A. If amending name, enter the new name o	f the limited liability company here:
The new name must be distinguishable and contain the v	words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:
(Principal office address MUST BE A STREE	ET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office address on our records, enter the name of the new registered ss here:
Name of New Registered Agent:	Victor Gonzalez Lara
New Registered Office Address:	4253 S Ferbon Blvd Enter Florida street address
	Crest View , Florida 32536

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.

f 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>	Address 2020 AUN 17 AN 9: 16	Type of Action
MGR	Ma de Jesus	4253 SFethon Blud Crestilew FL 32536	<b>X</b> Î∧dd
	Goircial Garzalez	Crestiew FC 32536	□Remove
			□Change
MGR	Victor Gonzalez	cva 4253 5 Ferbandu	
		Crestilew FL32536.	XRemove
			🗆 Change
	<u> </u>		□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<del></del>			🗆 Add
			□Remove
			□Change

Tr	<u>e r</u>	same	<u>On</u>	file	hai	S 0	NUE	eric	
549	Sbo'		1+	- 1-te	- K	100	Je J	ESUS	
$\overline{( )}$	71C/C	Y_50	0701	e7		· · · ·			_
<u> </u>	<u> </u>	2.5		<u> </u>					_
			<del></del> :	<del></del>					_
	<del></del>				<u></u>				_
								• * * * * * * * * * * * * * * * * * * *	_
				<del></del>				<u> </u>	_
								E.	, , <del>,</del> , <del>,</del> )
<del></del>									ب. _ص
		<del>-</del>						···	_
								· ·	_
									_
			_	<u> </u>		<del>-</del> .		<del></del>	-
									_
								<del></del>	_
<del>-, -,</del>	<del>-</del>								_
m effective da ote: If the d	ate is listed, t late inserted	than the date he date must be s d in this block d e on the Depart	e of filing: _ pecific and car loes not mee	t the applicable	ate of filing or n	) nore than 90 og requirem	(option; lays after tili ents, this di	al) ng.) Pursuant to 60 ate will not be lis	)5.026 sted a
ecord specifis filed.	fies a delay	ed effective date	e, but not an	effective time,	at 12:01 a.m.	on the earli	er of: (b)	The 90th day aft	er th
ted	311	7020	· _						
F	1ac	k Jes	SUS (	DCICIO iber or authorize	d representative	2006 of a member	2		