Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 : (954)384-8565 Fax Number : (954)385-5175

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONFINES LLC.

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Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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'ro:	Registration Sc Division of Cor		•	
en o re	CONFINE	S LLC		
SUBJE	l(li	Name of Lim	ited Liability Company	
The each	lused Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please n	cturn all correspo	ondence concerning this matter	to the following:	
		DIEGO FIGUEROA		
			Name of Person	
		E & F LATIN GROUP LL	.c	
			Pirm/Company	
		1820 N CORPORATE LA	KES BLVD SUITE 109	
			Address	
		WESTON, I/L 33326		
			City/State and Zip Code	
		DIEGO@EFLATINACCO	UNTING.COM to be used for future minual report notific.	rtiou)
For furt	ter information o	oncerning this matter, please of	·	seton)
DIEGO	FIGUEROA		954 384 8565	
	Nume o	f Person	at () Area Code Daytimo I	elephone Number
Enclosed	d is a check for th	ne following amount:		
을 ¥25	.06 Filing Fee	S30.00 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 5		<u>Street Address:</u> Registration S e cti	on:

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF ARTICLES OF AMENDMENT 2020 HAY 26 AH 10: 32

CONFINES LLC	,
(Name of the Limited Liability (A Florida)	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co. Florida document number [L20000076721]	empany were filed on 03/13/2020 and assigned
This amendment is submitted to amend the following:	_
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	7.SS)
Enter new mailing address, if applicable:	
(Matting address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
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 filled 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 2020 MAY 26 AM 10: 32

Title .	Name	Address	Type of Action
MGR	JAVIER OYANEDE).	2665 EXECUTIVE PARK DRIVE SUITE 2	ଲ ∧dd
		WESTON, FL 33331	
			OChange
MGR	OYANADRI, JAVIER	2665 EXECUTIVE PARK DRIVE SUITE 2	□Add
		WESTON, PL 33331	■Remove
			UChange
MGR	RUTH CARRASCO, ESMERALD	2665 EXECUTIVE PARK DRIVE SUITE 2	□\\dd
		WESTON, FL 33331	
			🗆 Change
MGR	ESMERALDA R. CARRASCO	2665 EXECUTIVE PARK DRIVE SUITE 2	B Add
		WESTON, FL 33331	
			UChange
			
			□Rumoye
			Change
			①Add
			□Remove
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ffective date, if other than the date of an effective date is listed, the date must be spe	of filing:	(op	tional)
an effective date is listed, the date must be speciotes. If the date inserted in this block do	ecific and cannot be prior to do less not meet the applicable	tate of filing or more than 90 days at a statutory filing requirements, t	ler filling.) Pursuant to 605.0207 his date will not be listed as
ocument's effective date on the Departm	ent of State's records.	, , , ,	
			41.5 TH 00.1 1 0 1
record specifies a delayed effective dute, his filed.	but not an effective time,	at 12:01 k.m. on the earlier of:	(b) The 90th day after the
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ated MAY 12			

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