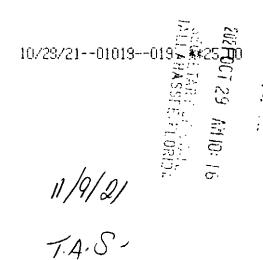
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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations		
SUBJECT: THE IZQU	TERDO'S LLC		
SUBJECT: THE IEQU		nited Liability Company	· <del></del>
		•	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MICHELLE IZQUIERDO		
		Name of Person	
	THE IZQUIERDO'S LLC		
		Firm/Company	
	8546 N.W. 47 STREET		
		Address	
	CORAL SPRINGS, FL 33		<del></del>
	d.rocketfuel@gmail.com	City/State and Zip Code	
	B-mail address: (	to be used for future annual report non	fication)
For further information of	oncerning this matter, please c	all:	
MICHELLE IZQUIERDO		at (786 ) 436 - 6711	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres	<u>s:</u>	Street Address:	•
Registration Section		Registration Se	
Division of C P.O. Box 632		Division of Cor	
r.O. box 032	I	The Centre of T	allahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE IZQUIERDO'S LLC	trad I lability Company or it now appears on	nur records
(Manue or the Patri	(A Florida Limited Liability Company)	and America sort/
The Articles of Organization for this Limited I	iability Company were filed on 3/16/20	20 and assigned
Florida document number <u>L20000077497</u>	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	20/21
	<del></del>	
		25.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
		0: <del>4</del>
		⊕r o
B. If amending the registered agent and/or	registered office address on our recor	ds, enter the name of the new registered
agent and/or the new registered office addr	ess here:	
Name of New Registered Agent:	MICHELLE IZQUIERDO	
New Registered Office Address:	8546 N.W. 47 STREET	
•	Enter Florida si	treet address
	CORAL SPRINGS	, Florida 33067
	City	Zin 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>	Address	Type of Action
MGR	HENRY D. IZQUIERDO	8546 NW 47 STREET	□ Add
		CORAL SPRINGS, FL 33067	■Remove
			Change
AMBR	HENRY D. IZQUIERDO	8546 NW 47 STREET	□Add
		CORAL SPRINGS, FL 33067	■Remove
			©Change
MGR_	MICHELLE IZQUIERDO .	8546 NW 47 STREET	
		CORAL SPRINGS, FL 33067	Remove
			© Change
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fforti	ve date, if other than the date of filing: (optional)	
an eff	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Po	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ent's effective date on the Department of State's records.	il not be listed as
vote:	·	
vote:		
vote: locum	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 9	Oth day after the
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Filing Fee: \$25.00