1200000 93367

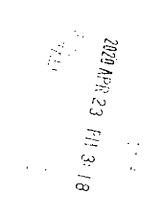
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| (==,,======, |
| PICK-UP WAIT MAIL |
| (Dunings Fraith Manna) |
| (Business Entity Name) |
| (Document Number) |
| (Document Namber) |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing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

Office Use Only



100343146241

04/23/20--01014--018 **30.00



OF WAGNS

MAY 0 7 2020

COVER LETTER

| TO: Registration Se Division of Cor | | | | |
|---|--|---|---|--|
| | ES DE CANARIAS | | | |
| SUBJECT: | Name of Lin | nited Liability Company | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all correspo | ondence concerning this matter | to the following: | | |
| | VANESSA LOGAN | | | |
| | | Name of Person | | |
| | LOS REYES DE CANAI | RIAS | | |
| | | Firm/Company | | |
| | 2776 West 54 Place | | | |
| | | Address | | |
| | Hialeah, Florida 33016 | | | |
| | | City/State and Zip Code | | |
| | losreyesdecanarias@gm | | | |
| For further information of | E-mail address: (oncerning this matter, please c | to be used for future annual report not | ification) | |
| Vanessa Logan | oncerning this matter. Nease c | 786 393-7243 | | |
| | | at () Area Code Daytin | | |
| Name o | t Person | Area Code Daytin | ne Telephone Number | |
| Enclosed is a check for the | he 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 radditional copy is enclosed) | |
| <u>Mailing Addres</u> Registration S | | Street Address: | oction | |
| Division of C | | Registration Section Division of Corporations | | |
| P.O. Box 632 | 27 | The Centre of | Fallahassee | |
| Taliahassee, l | FL 32314 | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 APR 23 PM 3: 18

LOS REYES DE CANARIAS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Embility Company)

| | , Florid: | Zip Code |
|--|--|---------------------------|
| | Enter Florida street address | |
| New Registered Office Address: | | |
| Name of New Registered Agent: | | |
| If amending the registered agent and/or registered office a igent and/or the new registered office address here: | address on our records, <u>enter the</u> | name of the new register |
| | | |
| Mailing address MAY BE A POST OFFICE BOX) | | |
| Enter new mailing address, if applicable: | | |
| | | |
| Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new principal offices address, if applicable: | | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LLC" or t | the abbreviation "L.L.C." |
| A. If amending name, enter the new name of the limited liabi | ility company here: | |
| This amendment is submitted to amend the following: | | |
| florida document number L20000093367 | | |
| The Articles of Organization for this Limited Liability Company | were filed on March 51, 2020 | and assigned |

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

2020 APR 23 Pil 3: 19

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|---|----------------|
| MGR | Vanessa Logan | 2776 West 54 Place Hialeah, Florida 33016 | ≣ Add |
| | | | □Remove |
| | | | □Change |
| | | | 🗆 Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | |
| | | | □Change |
| | | | 🗆 Add |
| | | | □Remove |
| | | | □Change |
| | | | 🗆 Add |
| | | | 🗆 Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | |

| | | | 2020 APR 2 | 3 PH 3: 18 | |
|---|---|---|---------------------------------------|---|--|
| | | | | 2 11: 2: 18 | |
| | | | | · . | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | - | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| · <u> </u> | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | ••• | - • | · · · · · · · · · · · · · · · · · · · | | |
| | , | | | | |
| | | | | | |
| | | | | | |
| Effective date, if other than the If an effective date is listed, the date in Note: If the date inserted in this b document's effective date on the I | it he specific and can ock does not meet | not be prior to dat the applicable : | e of filing or more than 90 | (optional) days after filing.) Pr nents, this date wi | arsuant to 605.0207 (3 Il not be listed as th |
| ne record specifies a delayed effection of is filed. | e date, but not an c | effective time, a | t 12:01 a.m. on the ear | lier of: (b) The 9 | 0th day after the |
| | 2 | 020 | | | |
| Dated | | · | | | |
| Dated April 15 | Signature of a mem | | representative of a memb | | |

Filing Fee: \$25.00