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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ACCOUNTING REVENUE SERVICE, INC.

Account Number : I20110000041

: (305)887-8730

Fax Number

: (305)887-8744

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 23943 SW BENAVIDES LLC

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(((H20000102211 3))). ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

23943 SW BENAVIDES LLC	·			<u></u>	
(Name of the Limit	d Liability Company as i A Florida Limited Liability	t now appears on our t y Company)	ecords.)		
The Articles of Organization for this Limited Li	ability Company were	filed on <u>04/03/2020</u>		and assig	med
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	f the limited liability o	ompany here:			
	•				
The new name must be distinguishable and contain the w	ords "Limited Liability Co	mpany," the designation	"LLC" or the	abbreviation "L.L.	.C.*
Enter new principal offices address, if applic	able:	<u> </u>		 	
(Principal office address MUST BE A STREE					
	·				
		•		20 1.17	
Enter new mailing address, if applicable:				204	
(Molling address MAY BE A POST OFFICE	<u>BOX</u>)			~ \$	<u> </u>
	· —				***************************************
	tarra adden		enter the n	ame of the new	register
B. If amending the registered agent and/or agent and/or the new registered office addressed	registered office addr as here:	ESS OIL ONL LECTION	enter the b	Ö.	Ü
Name of New Registered Agent:	RICHARD STEVE	N BENAVIDES	 -		
New Registered Office Address:	1956 SE 21 CT	· •			
TACH WORKS AND AND A LINE OF THE PARTY.	,	Enter Florida stres			
	HOMEASTED		, Florida	33035	·
•		Cîty		Ztp Cods	

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

(((H20000102211 3)))

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>	Name	Address	Type of Action
MGRM	Osyandy Diaz Casanova	1956 SE 21ST CT	□Add
•		HOMESTEAD, FL 33035	■ Remove
	•	,	Change
MGRM	Richard Steven Benavides	1956 SE 21ST CT	
:		HOMESTEAD, FL 33035	
			□Change
	,		□Add
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			☐ Change
•	r		□Add
			Remove
			Change
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			□Remove
			☐ Change
			□Add
	_ 		□ Remove
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n effective date is listed, the te: If the date inserted is cument's effective date of	n this ninka diles not	HICCL MIL OPPINGO	e statutory filing	requirements, in	is trate will not be
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ecord specifies a delayed	effective date, but no	ot an effective time	, at 12:01 a.m. o	n the earlier of: (b) The 90th day
is filed.	·		1		
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