. . . .

20000109319

| | | · |
|-------------------------|-------------------|-------------|
| (Re | questor's Name) | |
| (Ad | dress) | |
| (Ad | dress) | <u> </u> |
| (Cit | y/State/Zip/Phone | e #) |
| | | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Dc | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | Office Use On | to . |



10/25/22--01005--093 ++25.00

SEP 2 4 2022



R. HUNT

COVER LETTER

.

.

TO: **Registration Section Division of Corporations**

. .

ELITE BALLOONS BY FINA LLC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANGEL TRUJILLO RODRIGUEZ

| | <u> </u> | Name of Person | <u> </u> | |
|----------------------------|---|---|---|------------|
| | ELITE BALLOONS BY | FINA LLC | •. | -1 |
| | | Firm/Company | F | - - |
| | 2512 Centergate Dr Apt 2 | 0.3 | алан айтай 111 - Алан айтай | |
| | | Address | | 2 M |
| | Miramar Florida | | | |
| | atrujillo@sent.com | City/State and Zip Code | | Ξ |
| | E-mail address: | to be used for future annual report not | fication) | |
| For further information e | oncerning this matter, please o | all: | | |
| ANGEL TRUJILLO RO | DRIGUEZ | 754 610-5346 at () | | |
| Name of Person | | Area Code Davtim | e Telephone Number | - |
| Enclosed is a check for th | e 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 Address | <u>s:</u> | <u>Street Address:</u> | | |

M Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE BALLOONS BY FINA LLC

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

| The Articles of Organization for this Limited Liability Company were filed on MIRAMAR 10/19/2022 | and assigned |
|--|--------------|
| Florida document number L20000109319 | |

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FLAMINGO TRUST INSURANCE LLC

| The new name must be distinguishable and contain the words "Limited Liability Company," th | he designation "LLC" | or the abbreviation "L.L.C. | |
|--|----------------------|-----------------------------|--|
|--|----------------------|-----------------------------|--|

| Enter new [| rincipal offices address, if applicable: |
|---------------|--|
| (Principal of | fice address MUST BE A STREET ADDRESS) |

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

| 2512 CENTERGATE DR APT 2 | 03 | | |
|---------------------------|------------------------|--------|-----|
| MIRAMAR FLORIDA 33025 | <u></u> ۲۰۰۹ منه | -× | · ř |
| | 1.1. | 4 | |
| 2512 CENTERGATE DR APT 20 | | AM II: | Ö |
| MIRAMAR FLORIDA 33025 | Ш Т | | |

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

| Name of New Registered Agent: | ANGEL TRUJILLO RODRIGU | EZ |
|--------------------------------|--------------------------|--------------------------|
| New Registered Office Address: | 2512 CENTERGATE DR APT 2 | 03 |
| | Enter Fle | rida street address |
| | MIRAMAR | Florida ³³⁰²⁵ |
| | Ciņ | Zip 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------|---------------------------------------|----------------|
| | | | 🗆 Add |
| | | | |
| | | | □Change |
| <u> </u> | <u> </u> | | 🗆 Add |
| | | · · · · · · · · · · · · · · · · · · · | 🗆 Remove |
| | | | ⊇_□Change |
| | | | |
| | | | Remove |
| | | لارت جانب | □Change |
| | | | 🗆 Add |
| | | | 🗆 Remove |
| | | | Change |
| <u> </u> | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | 🗆 Add |
| | | | 🗆 Remove |
| | | | □Change |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

| | 02 | |
|--------------|--------------|----------|
| | ~ ~ ~ | |
| | 1.4 | |
| <i></i> | - X | |
| AHASSEE, FL | +2 Jas 2/102 | |
| ?· | 00 | |
| オン | 1 | : |
| | | |
| ကိုက | > | 1 1 1 |
| <u> </u> | 1 | |
| <u> </u> | I :II HA | [] |
| | | |
| <u> </u> | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| _ | | |
| | | |
| | | |
| | | <u> </u> |
| | | |

E. Effective date, if other than the date of filing: _________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

| Dated MIRAMAR 10/19 | / ²⁰²² | |
|---------------------|--|----------|
| | Anciel | |
| | Signature of a member or authorized representative of a member | - |
| ANGEL TRUJILLO ROL | DRIGUEZ | |
| | Typed or printed name of signee | |