

28/10/22, 12:53

Division of Corporations

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PETER MATHISON LLC
Account Number : I20210000152
Phone : (305)520-9343
Fax Number : (786)705-2040

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BIZALIA CASH LLC

Certificate of Status	0
Certified Copy	0
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OCT 28 2022

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OCT 31 2022
K. Brumley

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BIZALIA CASH LLC

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:

FERNANDO VILLARREAL

Name of Person

PETER MATHISON LLC

Firm/Company

800 SE 4TH AVENUE, SUITE 139

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

ADMIN@TUCONTADORENMIAMI.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FERNANDO VILLARREAL

305

520-9343

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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

Street Address:

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

BIZALIA CASH 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 05/11/2020 and assigned
Florida document number L20000126434.

This amendment is submitted to amend the following:

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

BI CASH LLC

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

Enter new principal offices address, if applicable:

800 SE 4TH AVENUE, SUITE 139

(Principal office address MUST BE A STREET ADDRESS)

HALLANDALE, FL 33009

Enter new mailing address, if applicable:

800 SE 4TH AVENUE, SUITE 139

(Mailing address MAY BE A POST OFFICE BOX)

HALLANDALE, FL 33009

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

Name of New Registered Agent:

TU CONTADOR EN MIAMI LLC

New Registered Office Address:

1946 TYLER ST, HOLLYWOOD

Enter Florida street address

FLORIDA

Florida

City

33020

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 Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	RIVAS MARIN, PABLO G	1946 TYLER ST	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALARCON DIAZ, SEBASTIAN A	1946 TYLER ST	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	VILLARROEL LUCERO, CRISTOBAL A	800 SE 4TH AVENUE, SUITE 139	<input checked="" type="checkbox"/> Add
		HALLANDALE, FL 33009	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

