LZ0000161860

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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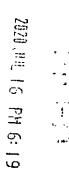


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COVER LETTER

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Fee, Status & y is enclosed)

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MANNY SANTOS TAX PRO		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
·		
The Articles of Organization for this Limited Liability Comp	pany were filed on 06/11/20	and assigned
Florida document number 1.20000161860		EM 6: 10
This amendment is submitted to amend the following:		
· ·		و
A. If amending name, enter the new name of the limited	liability company here:	
	<u>. </u>	
		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	S)	
•		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	···	541
3. If amending the registered agent and/or registered off	ace address on our records, enter the	e name of the new registe
gent and/or the new registered office address here:		
Name of New Registered Agem:		
Name of New Registered Agent.		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Floric	da
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

KARAMATA CARITESAN TEARS DINA

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBY	MANUEL SANTOS	15784 SW 139 ST MIAMI FL.33196	
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
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			□Remove
		.,	□ Change

			·	
				
		- 		
ective date, if other than the effective date is listed, the date mu	date of filing:	·	(optional)	
reffective date is listed, the date mu te: If the date inserted in this b	st be specific and cannot be prio lock does not meet the appli	or to date of filing or more the cable statutory filing requ	in 90 days after filing.) Pursuant to irrements, this date will not be	605.0201 listed as
sument's effective date on the D				
	to data, but not an attractive	time, at 12:01 a.m. on the	e earlier of: (b) The 90th day a	itter the
cord specifies a delayed effectives filed.	ve date, but not an effective			
s filed.				
s filed.	2020			
	2020			
s filed.		horized representative of a n	nember	