

L20000166473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

per Ms Lissette Flores change  
name of company only on  
6/9/21

Office Use Only



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JUN 09 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2020

LISSETTE FLORES  
8640 NW 38 ST  
APT 185  
SUNRISE, FL 33351

SUBJECT: FINANCIAL.INSURANCE.SPECIALY.TRADE, LLC  
Ref. Number: L20000166473

We have received your document for FINANCIAL.INSURANCE.SPECIALY.TRADE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 220A00025233

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Financial Insurance Specialty Trade, 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:

Lissette Flores

\_\_\_\_\_  
Name of Person

Financial Insurance Specialty Trade, LLC

\_\_\_\_\_  
Firm/Company

8640 NW 38 Street Apt.185

\_\_\_\_\_  
Address

Sunrise, FL 33351

\_\_\_\_\_  
City/State and Zip Code

fistllc23@gmail.com

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

For further information concerning this matter, please call:

Lissette Flores

786 682-8772  
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**

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Financial Insurance Specialty Trade, 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 06/16/2020 and assigned  
Florida document number L20000166473.

This amendment is submitted to amend the following:

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

Financial Insurance Specialty Trade, 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:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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: Eddie D Ocasio

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City 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**

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

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Title	Name	Address	Type of Action
MGR	Eddie D Ocasio	8640 NW 38th Street	<input checked="" type="checkbox"/> Add
		Apt.185	<input type="checkbox"/> Remove
		Sunrise, FL 33351	<input checked="" type="checkbox"/> Change
AMBR	Lissette Flores	8640 NW 38th Street	<input checked="" type="checkbox"/> Add
		Apt.185	<input type="checkbox"/> Remove
		Sunrise, FL 33351	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Eddie Ocasio & Lissette Flores will not be responsible for any name infringement that may result from our name selection as the name availability was researched through the Division records at [www.sunbiz.org](http://www.sunbiz.org), [www.legalzoom.com](http://www.legalzoom.com), and [www.start.biz.com](http://www.start.biz.com) on 06/16/2020 upon initial filing of Articles of Organization.

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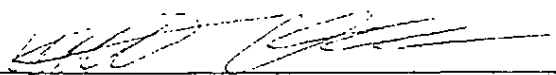
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 October 31 10/31/2020 . 2020 .

  
Signature of a member or authorized representative of a member

Eddie O Ocasio  
Typed or printed name of signee