## L20000 189500

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only

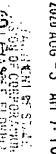


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08/03/20--01031--008 \*+25.00

SEP 2 2 2020

S. YOUNG



## **COVER LETTER**

TO: Registration Se Division of Cor		•			
COMELYA					
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ANTONIO REGOJO				
Name of Person					
	Avenida Legal LLC				
		Firm/Company	<del></del>		
	12550 BISCAYNE BLVD	STE 110			
		Address			
	MIAMI, FL 33181				
	<del></del>	City/State and Zip Code			
	info@avenidalegal.com				
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report no all:	nilication)		
ANTONIO REGOJO		305 814-8299 at ()			
Name o	of Person	Area Code Daytis	me Telephone Number		
Enclosed is a check for t	he following amount:				
<b>■</b> \$25.00 Fiting 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)		
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection		
Division of C	Corporations	Division of Co	orporations		
P.O. Box 633		The Centre of	Tallahassee oe Street, Suite 810		
Tallahassee,	ΓL 32314	∠415 IN. IVIOHI	oc succi, suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COMELYA LLC

COMELTATILE			
(Name of the Limited (A	Liability Company as it now appears of Florida Limited Liability Company)	on our records.)	
		یہ	
The Articles of Organization for this Limited Liab	oility Company were filed on 07/06	5/2020 and assign	
Florida document number L20000189500	<u></u> -	and assign	ca •
This amendment is submitted to amend the follow	ring:	Frank J	į
A. If amending name, enter the new name of the	ne limited liability company here		<u>ڊ</u> د
The new name must be distinguishable and contain the word	b "Limited Liability Company" the devi		6_
Enter new principal offices address, if applicable		guadon LLC of the appreviation."L.L.C.	•
(Principal office address MUST BE A STREET A	<u>4DDRESS)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.		<del></del>	
A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office address he  Name of New Registered Agent:	stered office address on our reco ere:	rds, <u>enter the name of the new reg</u>	<u>ister</u>
New Registered Office Address:	Enter Florida	trust addings	
	Enter Florida street address		
-	City	Florida	
New Registered Agent's Signature, if changing Regis		Zip Code	
HETEDY OCCUM the appropriate and a section of the			
eccept the obligations of my position as registere eing filed to merely reflect a change in the regis	stered office address. I to set	duties, and I am familiar with and	th the l is
eccept the obligations of my position as registere	na complete performance of my ( 2d agent as provided for in Chap stered office address. I have t	duties, and I am familiar with and	th the l is
eccept the obligations of my position as registere eing filed to merely reflect a change in the regis	na complete performance of my ( 2d agent as provided for in Chap stered office address. I have t	duties, and I am familiar with and	th the l is
except the obligations of my position as registere eing filed to merely reflect a change in the regis	nd complete performance of my well agent as provided for in Chap stered office address, I hereby co age.	duties, and I am familiar with and	th th l is

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
MGR	HECTOR JORGE GARABENTO	7601 E Treasure Drive #2004	
		North Bay Village, FL 33141	
			Change
	<del></del>		□Add
			□Remove
			[]Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			_
			•
			□Change

<del>_</del>	<u></u>						
				<del></del>	<del></del>		
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		<del></del>					
		<del>-</del>	_	<u> </u>		<del></del>	
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				<del></del>			
		<del></del>	<del></del>	_	<del></del>		
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			_	<del>-</del>			
						<u> </u>	_
			- <u>-</u>		<del>-</del>		
	<del></del>				<del></del>		<del></del>
<del></del>	<del></del>						
Effective date, if other than t f an effective date is listed, the date is Note: If the date inserted in this locument's effective date on the	Department of	State's record	ls.	ory ming requ	irements, this	date will not be	listed as th
record specifies a delayed effect distilled.	five date, but no	t an effective	time, at 12:0	)1 a.m. on the	earlier of: (b)	The 90th day a	fter the
		2020					
Dated UILY 27		` ——	<del></del> ·				
ated	Signature of a	member or aut	horized repres	entative of a m	ymber		
HECTOR JORGE GA			horized repres	entative of a me	mber		

Filing Fee: \$25.00