



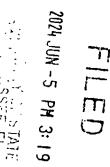
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## **COVER LETTER**

	Spot by Alessandra Vallejo, L	I.C	
SUBJECT:	Name of Limi	ted Liability Company	<del></del> -
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Luis E Gutierrez		
		Name of Person	<del></del>
		Firm/Company	
	425 Grapetree Dr apto 201	•	
		Address	
	Key Biscayne , FL , 33149		
		City/State and Zip Code	
	alessandra@thegroomspot.n	et to be used for future annual report noti	fication)
For further information e	oncerning this matter, please or	·	,
Luis E Gutierrez		305 8152639 at ( )	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	(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

The Groom Spot By Alessandra Vallejo LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000190315</u> .	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:	20:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	Luis E Gutierrez		
(Principal office address MUST BE A STREET ADDRESS)	425 Grapetree Dr, Apto # 201	> S	
	Key Biscayne, Fl 33149	300 <b>33</b> [1]	
Enter new mailing address, if applicable:	Luis E Gutierrez	3: 19 STATE	
(Mailing address MAY BE A POST OFFICE BOX)	425 Grapetree Dr Apto # 201		
	Key Biscayne FL 33149		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the	name of the new registered	
	, Florid	da Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	<u>I</u>		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and l provided for in Chapter 605, F.S	I am familiar with and S. Or, if this document is	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Luis E Gutierrez Vallejo	425 Grapetree Dr apto # 201	≣Add
		Key Biscayne FL 33149	□Remove
			□Change
			CRemove
			☐ Change
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			□Remove
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			Remove
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. Effective	date, if other than the	date of filing:		(opti	onal)	
Note: If	ive date is listed, the date must the date inserted in this blacks on the De	ock does not meet the ap	plicable statutory:	iling requirements, thi	filing.) Pursuant to 605.02 s date will not be listed a	07 (3)(t as the
the record second is	specifies a delayed effectiv l.	e date, but not an effecti	ve time, at 12:01 a	m, on the earlier of: (b	o) The 90th day after th	c
Dated M	ay 29th	2024	— . Jø	0 ,		
			N (V)	<i>]</i>   /		

Typed or printed name of signee