

L20 000204364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

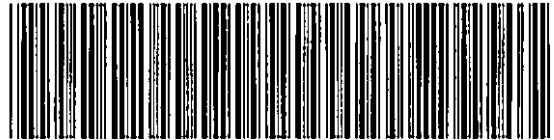
(Business Entity Name)

(Document Number)

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2021 FEB -1 PM 3:08  
SECURITY

○ SIMMONS

FEB 02 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021-12-15 10:00:00

December 15, 2020

CARLOS ARAGON  
11323 SW 157TH PL  
MIAMI, FL 33196

SUBJECT: NAZA FULL COMPANY LLC  
Ref. Number: L20000204364

We have received your document for NAZA FULL COMPANY LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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: 120A00025270

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NAZA FULL COMPANY 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:

CARLOS M ARAGON

Name of Person

CARLOS M ARAGON

Firm/Company

11323 SW 157 TH PL

Address

MIAMI/FLORIDA 33196

City/State and Zip Code

caragon@nazafullcompany.com

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

For further information concerning this matter, please call:

CARLOS M ARAGON

786

7142641

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**

NAZA FULL COMPANY 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 200722123602-700348265307 and assigned Florida document number L20000204364.

This amendment is submitted to amend the following:

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

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)**

14530 SW 122nd pl

**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:

New Registered Office Address:

14530 sw 122nd Pl

*Enter Florida street address*

:Miami

*City*

Florida 33186

*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

LED

<u>Title</u>	<u>Name</u>	<u>Address</u>	2021 FEB -1 PM 3: 08	<u>Type of Action</u>
AMBR	CARLOS M ARAGON	14530sw 122nd pl-Miami, FL 33186	<input type="checkbox"/> Add	
			<input type="checkbox"/> Remove	
			<input checked="" type="checkbox"/> Change	
AMBR	STELLA C GALARZA	14530 sw 122nd pl Miami, FL 33186	<input type="checkbox"/> Add	
			<input type="checkbox"/> Remove	
			<input checked="" type="checkbox"/> Change	
AMBR	CESAR E ARAGON	11323 SW 157 TH PL MIAMI, FL 33196	<input type="checkbox"/> Add	
			<input type="checkbox"/> Remove	
			<input checked="" type="checkbox"/> Change	
			<input type="checkbox"/> Add	
			<input type="checkbox"/> Remove	
			<input type="checkbox"/> Change	
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			<input type="checkbox"/> Remove	
			<input type="checkbox"/> Change	
			<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.)*

PARTICIPATION ACCORDING TO INVESTMENT IN THE COMPANY

CARLOS M ARAGON - 85%

2021 FEB -1 PM 3:08

STELLA C GALARZA -10%

CESAR E ARAGON - 5%

**E. Effective date, if other than the date of filing:** 10/01/2020 **(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 \_\_\_\_\_

Signature of a member or authorized representative of a member

CARLOS M ARAGON

Typed or printed name of signee