## L20 000209340

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OCT 2 7 2020 S. YOUNG

## **COVER LETTER**

TO: Registration Ser Division of Cor			
SUBJECT: <u>E</u>	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Osmay E.	Name of Person	chez
	EMILIO'S	S <u>ZZ C</u> Firm/Company	<del></del>
	- 5625 V	V 17th Ave	<u> </u>
	Hialeah	FL 33012 City/State and Zip Code	<del></del>
	Osmayoil. E-mail address: (	ne Q yahoo. com to be used forhiture annual report notif	fication)
For further information ec	oncerning this matter, please co	<u>-</u>	
Damay Em	lio Perez Sance	Area Code Daytime	4298
, rune of	, cravii	Area Code Dayum	e Telephone Number
Enclosed is a check for the	e 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

(Name of the Limited Liability Compa	Any as it now appears on our records )
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on July 30th 2030 and assigned
Florida document number <u>L 2000 0 2093 40</u>	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
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:	
(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 a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
Name Danietannad Agant's Cianatana if alamaia. Bediana i	•
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 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	Samuel Carabeo Couce	6381 Cow Pen Rd	<b>,⊠</b> ,Add
		Unit V202	□Remove
		Miami Lakes FL 33014	□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
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<del></del>			□Add
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, ,, «,,,	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	we date, if other than the date of filing:
he record ord is file	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
Dated _	09/04/2020.
	Signature of a member of authorized representative of a member
	To move inted name of signee