LZO 000331078

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Dx	ocument Number)	
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. COVER LETTER

	Registration Se Division of Cor			
SUBJEC		LIGENT LLC		
SOBJEC		Name of Litt	nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		MILAGROS VILORIA		
			Name of Person	
		2574 N UNIVERSITY DE	R	
			Firm/Company	
		SUITE 207A		
			Address	
		SUNRISE FL 33322		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report n	otification)
For further	er information c	oncerning this matter, please c	all:	
MILAGR	ROS VILORIA		954 3910812	
	Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	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 Addres		Street Address:	
	Registration S Division of C		Registration S Division of C	
	P.O. Box 632		The Centre of	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

nii intelligent lec		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company lorida document number $\frac{1.20000331078}{1.0000331078}$.	were filed on 10/19/2020	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2920
		<u>কু</u> শা
		<u> </u>
nter new mailing address, if applicable:		ъ 111
Mailing address MAY BE A POST OFFICE BOX)		
Manny water Mill be in our of the Born		11] E
		
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new regis
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	vince r tortaa street aaaress	
	Florid	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

DIT NITCH LICENT LLC

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
AMBR	COLMENARES BURGOS	7901 NW 77TH AVE APT 307	
	DARWUIN E	MIAMI FL 33150	■Remove
			□Change
AMBR	COLMENAREZ, DARWUIN E	7901 NW 77TH AVE APT 307	■Add
		MIAMI FL 33150	□Remove
			□Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be price.		3 00 1	(optional)		.05.03.07
ote: If the date inserted in this block does not meet the appli	icable statutory	filing requiremen	ts, this date will	not be l	isted as 1
ocument's effective date on the Department of State's record	ls.				
record specifies a delayed effective date, but not an effective lis filed.	time, at 12:01 a	.m. on the earlier	of: (b) The 90	ih day at	fter the
NOVEMBER 13 2020					
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1 // \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Signature of a member or auti					

Typed or printed name of signee