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COVER LETTER

SUBJECT: Name of Limited Liability Company
Name of Limited Liability Company The enclosed Articles of Amendment and fec(s) are submitted for filing. Please return all correspondence concerning this matter to the following: JORGE SARRIA PUENTES Name of Person JL SARRIA, LLC. Firm/Company 9760 ALASKA CIR Address BOCA RATON . FL 33434 City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
Please return all correspondence concerning this matter to the following: JORGE SARRIA PUENTES Name of Person JL SARRIA, LLC. Firm/Company 9760 ALASKA CIR Address BOCA RATON . FL 33434 City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
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Firm/Company 9760 ALASKA CIR Address BOCA RATON . FL 33434 City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
9760 ALASKA CIR Address BOCA RATON . FL 33434 City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
Address BOCA RATON . FL 33434 City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
City/State and Zip Code JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
JLSARRIA@YAHOO.COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JORGE SARRIA 720 345 2434 at ()
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee S30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee & □

TO:

Registration Section

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

JL SARRIA, LLC.			
(Name of the Limit	ed Liability Company as it now appears on or (A Florida Limited Liability Company)	ır records.)	
he Articles of Organization for this Limited Li	ability Company were filed on10/21	/2020	_ and assigned
orida document numberL20000333601	·		
his amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	the limited liability company here:		
ne new name must be distinguishable and contain the w	ords "Limited Liability Company," the designat	ion "LLC" or the abbre	viation "L.L.C."
nter new principal offices address, if applic	able:		
Principal office address MUST BE A STREE	T ADDRESS)	4	
		No.	202
		in i	30 DE
nter new mailing address, if applicable:		- 그	F 1
failing address MAY BE A POST OFFICE	BOX)	***	7
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. If amending the registered agent and/or regent and/or the new registered office address		s, enter the name (
Name of New Registered Agent:	MAHE TUERO DE SARRIA		
New Registered Office Address:			
	Enter Florida stre	et address	
		, Florida	
	City		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MAHE TUERO DE SARRIA	9760 ALASKA CIR	J [Add
		BOCA RATON . FL 33434	□Remove
			□Change
AR	MAHE TUERO RIOS	9760 ALASKA CIR	□Add
		BOCA RATON . FL 33434	ÆRemove
		□Change	
	 		□ Add
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an eff lote:	rective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
recor l is fi	rd 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 iled.
	Pecember 02, 2020.
ated	
ated	Fame
ated	Pecember 02 , 2020. Signature of a member or authorized representative of a member