

6/24/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L200000336725**

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : E & F LATIN GROUP LLC  
Account Number : I20160000049  
Phone : (954)384-8565  
Fax Number : (954)385-5175

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Office@eflatinaccounting.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PRIX CONSULTING LLC

Certificate of Status	0
Certified Copy	0
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PRIX CONSULTING 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:

**DIEGO FIGUEROA**

Name of Person

**E & F LATIN GROUP, L.L.C.**

Firm/Company

**1820 N CORPORATION LAKES BLVD STE 109**

Address

**WESTON, FL 33331**

City/State and Zip Code

**DIEGO@EFLATINAACCOUNTING.COM**

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

For further information concerning this matter, please call:

**DIEGO FIGUEROA**

at ( **954** ) **384 8565**

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

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIX CONSULTING 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 01/02/2021 and assigned  
Florida document number L20000336725

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)

19790 W DIXIE HWY

SUITE 308

MIAMI FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19790 W DIXIE HWY

SUITE 308

MIAMI FL 33180

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:

E & F LATIN GROUP, L.L.C.

New Registered Office Address:

1820 N CORPORATION LAKES BLVD STE 109

*Enter Florida street address*

WESTON

*City*

Florida 33326

*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.*

Dreyo Tyler

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>	<u>Address</u>	<u>Type of Action</u>
		BUCHTER, FABIANA	<input type="checkbox"/> Add
		19790 W DIXIE HWY SUITE 308	<input type="checkbox"/> Remove
		MIAMI FL 33180	<input checked="" type="checkbox"/> Change
		SZLAIEN, BRANDON	<input type="checkbox"/> Add
		19790 W DIXIE HWY SUITE 308	<input type="checkbox"/> Remove
		MIAMI FL 33180	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<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.)**

EIN 85-3762861

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**F. Effective date, if other than the date of filing:** 06/24/2021 (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 JUNE 24 2021

Diego Trullerod  
 Signature of a member or authorized representative of a member

Registered Agent

Typed or printed name of signee

**Filing Fee: \$25.00**