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12/28/20

COVER LETTER

	ation Section of Corpora				are F
SUBJECT.	S1, LLC			.4	
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed Arti	icles of Ame	ndment and fee(s) are sul	bmitted for filing.		
Please return all c	orresponden	ce concerning this matter	to the following:		
	1	canette Hernanez-Suarez,	, Esq.		
			Name of Person		
	J	vanette Hernandez-Suare	z, P.A.		
	-		Firm/Company		
	1	1410 North Kendall Driv	e, Suite 205		
	_	· · ·	Address		<u> </u>
	N	fiami, FL 33176			
	_		City/State and Zip Code	;	·
	he	mandez205@yahoo.com			
			to be used for future annua	l report notificatio	n)
For further inform	ation concer	ning this matter, please c	all:		
Jeanette Hernandez-Suarez		305 59	061044		
	Name of Pers	on	Area Code	Daytime Tele	phone Number
Enclosed is a chec	k for the foll	owing amount:			
□ \$25.00 Filing		\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing /			Street A		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Bo				ntre of Tallah	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11251, 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 10/28/2020 and assigned Florida document number ______L20000342512 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 "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Miriam Espinosa Name of New Registered Agent: New Registered Office Address: Florida 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

Title	<u>Name</u>	Address	Type of Action
Member	Miriam Espinosa	11251 SW 146 Court	_≣ Add
		Miami, Florida	□Remove
		□Change	
Manager Mirian C. Rojas	11251 SW 146 Court		
	Miami, FL 33186	≣Remove	
		□Change	
		2020 NOV 23	
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If an effective date is Note: If the date i document's effecti	other than the da listed, the date must be nscreed in this block we date on the Depa delayed effective d	e specific and cannot k does not meet the artment of State's i	e applicable sta records.	tutory filing requ	irements, this d	ling.) Pursuant to late will not be	listed as the
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d is filed.			(1	, / 1			
rd is filed. Dated Novemner I	3,	, 2020	·	Jan W			
November 1		mature of a member		Jam)	ember		

Filing Fee: \$25.00