

L20000349476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2023 JUN -6 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FL

Amend/Name Change

AUG 02 2023

D CUSHING

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 101 RELOCATION 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:

ANDREA GOMEZ

Name of Person

101 RELOCATION LLC

Firm/Company

745 CRANDON BLVD PH7

Address

KEY BISCAVNE FL 33149

City/State and Zip Code

GOMEZANDREA@MSN.COM

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

For further information concerning this matter, please call:

ANDREA GOMEZ

Name of Person

787 at ()

Area Code

404-4389

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

SECRETARY OF STATE
TALLAHASSEE, FL

2023 JUN -6 AM 9:54

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

101 RELOCATION 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 11-03-2020 and assigned
Florida document number L20000349476.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ANDREA GOMEZ PALAU LLC

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)

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

CHANGE OF ENTITY NAME TO ANDREA GOMEZ PALAU AND REMOVAL OG AMBR-PILAR GRIMAL

E. Effective date, if other than the date of filing: 05-24-2023 **(optional)**

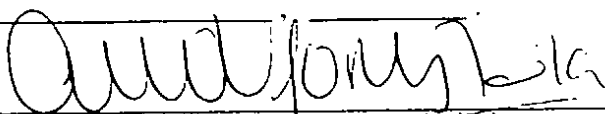
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(

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 MAY 24

2023



Signature of a member or authorized representative of a member

ANDREA GOMEZ

Typed or printed name of signee