

5/12/2021

Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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

From:
 Account Name : COMPANY COMBO, LLC
 Account Number : I20160000033
 Phone : (866)428-2030
 Fax Number : (407)308-0481

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 SECRETARY OF STATE
 FLORIDA
 BIA
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**Enter the email address for this business entity to be used for future
 annual report mailings. Enter only one email address please.**

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 BAIATECH, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
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FLORIDA
DEPARTMENT
OF STATE
BAIATECH, LLC

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Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

BAIATECH, LLC

SUBJECT: _____
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:

PAOLA C.

Name of Person
COMPANY COMBO, LLC

Firm/Company
2815 DIRECTORS ROW STE 100

Address
ORLANDO, FL 32809

City/State and Zip Code
DOCS@COMPANYCOMBO.COM

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

2021 MAY 12 PM 1:14:7

SECRETARY OF STATE
TALLAHASSEE, FL

FILED

For further information concerning this matter, please call:

PAOLA C. _____
Name of Person at (_____
Area Code) 866 428-2030
Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|---|---|--|

MailingAddress:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

StreetAddress:
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**

BAIATECH, 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 L20000349518.

This amendment is submitted to amend the following:

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

IBERIAN BUSINESS INTELLIGENCE, 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)

2021
11/03
12
FL
IBERIAN BUSINESS INTELLIGENCE, LLC
STATE OF FLORIDA
L20000349518

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

_____ . 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 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

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

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SECRETARY OF STATE
WILLIAM J. BROWNFIELD

E. **Effective date, if other than the date of filing:** _____ (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 MAY 11 2021

Signature of a member or authorized representative of a member

ANA GAMA LEAO

Typed or printed name of signee

Filing Fee: \$25.00