





Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000436811-3)))



H21000436811346C

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERVICIOS COMUNITARIOS LATINOS INC

Account Number : I20080000080 Phone : (305)642-1090 Fax Number : (305)642-1010

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

Email Address: Flashwootfloors 20 gmail con

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BDL INTERNATIONAL BUSINESS LLC

Certificate of Status	0
Certified Copy	U
Page Count	01
Estimated Charge	\$25.00

SELFENANT OF STATE SELFENANT OF STATE ALLAHASSEE, FLORIOA

Electronic Filing Menu

Corporate Filing Menu

Help

To:

COVER LETTER

(((H21000436811 3)))

TO: Registration Sec Division of Corp			
BDL INTE	RNATIONAL BUSINESS LLC		
SUBJECT:	Name of Firm	led Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing	
Please return all correspo	ondence concerning this matter	to the following.	
	BYRON MONTENEGRO		
	The second secon	Name of Person	
	BDL INTERNATIONAL	BUSINESS LLC	
		Firm Company	
	4326 W FLAGLER ST AF	T 5	
		Address	<u></u>
	MIAMI, FL. 33134		
		City/State and Zip Code	
	FLASHWOODFLOORS2@	gGMAIL.COM to be used for future annual report noti	(ication)
For further information of	E-mail address: (oncerning this matter, please c		realist
		786 4747817	
BYRON MONTENEGR Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
≦ \$ 25.00 Filing Fœ	☐ \$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 Addres	Section	Street Address: Registration S	
Division of C P.O. Box 632		Division of Co The Centre of	
Tallahassee, f			roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

OF

(((H210004368113)))

BDL INTERNATIONAL BUSINES	SILC					
(Name of the Limiter	Liability Compa Visionda Limited	nny as it now appears on our re Liability Company)	cords.)			
The Articles of Organization for this Limited Lia Florida document numberL20000376609	bility Company			and ass	igned	
his amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited lial	oility company here:				
N'A						
N/A The new name must be distinguishable and contain the we	ords "Limited Liab	ility Company," the designation	"LLC" or the ab	breviation "L.	L.C."	
Enter new principal offices address, if applica	ıble:	N/A		··		
(Principal office address MUST BE A STREE)	(ADDRESS)					_
Enter new mailing address, if applicable:		N/A				
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	egistered office s here:	address on our records, e		SEE SEE	v regis	steri
		City	Florida _	The stands	P# 12	<u>_;</u>

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.

New Registered Agent's Signature, If changing Registered Agent:

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: (((H210004368113)))

MGR = Manager AMBR = Authorized Member

Name	Address	Type of Action
IRENE RIZO COTTERREZ	4326 W FLAGLER ST APT 5	≡Add
	MIAMI, FL. 33134	□Remove
		() Change
		[] Add
		□ Change
		Dadd
		□Remove
		□ Change
		🖸 Add
		□Remove
		Change
		OAdd
		□Remove
		Change
		□Add
		□Remove
		Change
		IRENE RIZO GOTTERREZ 4326 W FLAGLER ST APT 5 MIAMI, FL. 33134

(((H21000436811.3)))

1				
			<u></u>	
				· · · · · · · · · · · · · · · · · · ·
				
				<u></u>
			· 	
	<u></u>			
fective date, if other than the in effective date is listed, the date mu	e date of filing:		(optional)	
ite: If the date inserted in this b	ust be specific and cannot be pro plock does not meet the appli Department of State's record	cable statutory filing requ	m 90 days after filing uirements, this date	a) Pursuant to 605.03 will not be listed
cument's effective date on the I			e carlier of: (b) T	he Dith day after t
ecord specifies a delayed effecti	ive date, but not an effective	time, at 12:91 a.m. on the		S: 2
ecord specifies a delayed effecti is filed.	ive date, but not an effective	time, at 12:91 a.m. on the		NOV 30 PI
ecord specifies a delayed effecti is filed.	, 2021	time, at 12:01 a.m. on the	·	REINOV 30 PM 12: 48