7/9/2021

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Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081

: (307)200-2803

Fax Number

: (855)330-1010

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

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Electronic Filing Menu — Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I	Liability Compan Florida Limited Li	y as it now appears on our lability Company)	records.)		
The Articles of Organization for this Limited Liabi	ility Company v	were filed on <u>12/29/20</u>	020 a	nd assigned	
This amendment is submitted to amend the followi	ing:				
A. If amending name, enter the new name of th	e limited liabil	lity company here:		88 11416 2	
The new name must be distinguishable and contain the word	ls "Limited Liabili	ty Company," the designation	on "LLC" or the abbreviat	ion L.C.	
Enter new principal offices address, if applicable	le:	7901 4th St. North	n, Suite 5706	— 1-9-00-00-00-00-00-00-00-00-00-00-00-00-0	
(Principal office address MUST BE A STREET ADDRESS)		St. Petersburg FL	33702	P STATE CORPORATION 43	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7901 4th St. N. St	uite 5706	TIONS	
		St. Petersburg FL	33702		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered off te address here	fice address on our i	records, <u>enter the t</u>	name of the new	
Name of New Registered Agent:	Name of New Registered Agent: Registered Agents Inc.				
New Registered Office Address:	7901 4th S	St N STE 300 Enter Florida stree	et address		
St. Peter		sburg Florida 3370		2	
		City	Zij	o 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

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>	Name	Address	Type of Action
AMBR	Eulises Franco Quintero	7901 4th St. N, Suite 5706	
		St. Petersburg FL 33702	☐ Remove
			Change
			□ Add
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			SECRETARY VISION OF CO
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	_ ~	SKS
E. Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	∍ 605,020 : listed a	07 (3)(b) is the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e(b). The 90th day after the record is filed.	arlier (of:
Dated 07/09 2021		
R: Lung Tark. Signature of a member or authorized representative of a member		
Rilev Park		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00