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(Requ	estor's Name)	
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PICK-UP	MAIT	MAIL
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(Docu	ment Number)	
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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

	O IMMIGRATION LAW LLC	•	
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	ntted for filing.	
Please return all correspo	ondence concerning this matter to	o the following:	
	Roberto A. Montalyo		
		Name of Person	
	MONTALVO IMMIGRATI	ON LAW LLC	
		Firm/Company	
	415 E Pine St, Apt 1514		
	***************************************	Address	
	Orlando FL 32801		
		City/State and Zip Code	
	rm@montalvoimmigrationla		
	E-mail address: (to	be used for future annual report noti	fication)
For further information c	concerning this matter, please cal	ll:	
Roberto A. Montalvo		787 5992292 at ()	
Name o	of Person		e Telephone Number
Enclosed is a check for the	he 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)
<u>Mailing Addres</u> Registration 1		<u>Street Address:</u> Registration Se	etion
Division of C		Division of Cor	
P.O. Box 632		The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MONTALVO IMMIGRATION LAW 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 January 4, 2021	and assigned
Florida document number L21000011390	
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 "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)	
	r <u>. </u>
B. If amending the registered agent and/or registered office address on our records, enter the na	me of the new regist
agent and/or the new registered office address here:	T;
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
	: 10
, Florida,	Zin Cade

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>	<u>Name</u>	Address	Type of Action
MGR	Roberto A. Montalvo	415 E Pine St, Apt 1514, Orlando FL 32801	= Add
			□ Remove
			□Change
AMBR	Roberto A. Montalvo	415 E Pine St, Apt 1514, Orlando FL 32801	■Add
			🗆 Remove
			□ Change
			🗆 Add
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	- <u></u>		□Add
			□Remove
			□ Change

	
	<u> </u>
Note: If the da	e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 are inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ective date on the Department of State's records.
he record specifiord is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated February	2021
	La FALAH
	1/1 1/1 1/1/V
	Signature of a member or authorized representative of a member