L21000066497

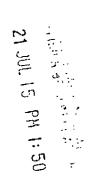
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





900368903839

67/15/21--0.010 -017 +-21.09



COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: <u>La</u>	Ccia Crew Name of Limit	LLC ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	Celiu	M. Reyes-Ale	-man
		Firm/Company	
	10303	Cove ove	
	Pensacojo	FI 32534 City/State and Zip Code	
-	E-mail address: (to	36 9mail-com	ication)
For further information cond	erning this matter, please cal	I:	
Cecic Name of Pe	M. Reyes-Alem	Area Code Daytime	74 24 Telephone Number
Enclosed is a check for the f	following amount:		
≥ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF	ORGANIZATION OF	\$4
	OF A CHARLES TO THE STATE OF TH	(0
	OF 21 JUL 15 PH 1:5	, 5
<u>La Céja Crail</u>	LLC	
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	iy were filed on <u>Februasy 8, 2021</u> ar	id assigned
Florida document number <u>L21000066497</u> .	, ,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation	on "lL.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)		
(Maning universe MAT BE AT OST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	address on our records, enter the name of th	e new registered
-		
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:

AMBR =	Manager Authorized Member		21 JUL 15 PH 1:50	
<u>Title</u>	<u>Name</u>	Address	21 JUL 13	Type of Action
				□Add
			·	□Remove
				□Change
				□Add
				□Remove
		48-1		□ Change
				□ Add
				Remove
				□Change
				🗆 Add
		-		Remove
				□ Change
				□ Add
				□Remove
				□Change
				□Add
				□Remove
				□ Change

Need	to ch	ange the	1.11e1111	From PHODED to
AMBR.			21	INT 12 11.
AMBR	Cecia	Maria	Reyes -	Alemán
	-			
e: If the date inserted	e date must be spe in this block doe	cific and cannot be prior	to date of filing or more able statutory filing re	(optional) than 90 days after filing.) Pursuant to 605.0 equirements, this date will not be listed
ord specifies a delaye filed.	d effective date,	but not an effective tir	ne, at 12:01 a.m. on t	he earlier of: (b) The 90th day after t
d <u>7-12-</u>	2021 Tarvella	y MGW1 are of a member or autho		
		Reves - Yyped or printe		

Filing Fee: \$25.00