

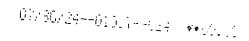
## 121000 115 339

(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:

Office Use Only



200433813732



## **COVER LETTER**

TO: Registration So Division of Con			
REY & JIM	A. ELC		
SUBJECT:	Name of Lin	nited Liability Company	<del>.</del>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	MICHEL MORGADO M	ARTINEZ	
	<del></del>	Name of Person	
	REY & ЛМ, LLC		
		Firm Company	·
	820 NW 87TH AVE, APT	7.403	
		Address	
	MIAMI, FL 33172		
		City/State and Zip Code	
	E-mail address; (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please o	rall:	
MICHEL MORGADO		972 8216204	
Name of Person		at () Area Code Daytin	ne Felephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 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 Registration	<del></del>	Street Address: Rouistration So	etion
Division of C		Registration Section Division of Corporations	
P.O. Box 632	27	The Centre of T	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REY & ЛМ, LLC				
( <u>Name of the Limited Lia</u> (A Flo	ibility Company orida Lumited Lia	v as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited Liabilit	y Company w	vere filed on MARCH 10, 2021	and assigned	
lorida document number L210000115339				
his amendment is submitted to amend the following	ŗ.			
. If amending name, enter the new name of the l	<u>limited liabili</u>	ity company here:		
he new name must be distinguishable and contain the words "l	Limited Liability	y Company," the designation "ELC" or the	abbreviation "L.4C."	
nter new principal offices address, if applicable:		820 NW 87TH AVE APT 403	2.5.5.	
Principal office address MUST BE A STREET ADDRESS)		MIAMI FL. 33172	<u>.</u> Ξ	
	<del></del>		(.)	
			: 1	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>		117 NW 42ND AVE APT 1410	£-	
		MIAMI FL, 33126		
. If amending the registered agent and/or registerent and/or the new registered office address here  Name of New Registered Agent:	red office ad <u>e</u> : IMY MORGA		ime of the new regis	
	117 NW 42ND AVE APT 1410			
New Registered Office Address: 117	- 18 W #28D A	VI; APT 1410  Enter Florida street address		
ML	АМІ		83176	
		, Florida _	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.

Morayand and 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>	<u>Address</u>	Type of Action
AMBR	JIMMY MORGADO PEREZ	117 NW 42ND AVE APT 1410	<b>≣</b> Add
		MIAMI FL. 33126	□Remove
			□ Change
MGR	MICHEL MORGADO	117 NW 42ND AVE APT 1410	□ Add
		MIAMUFL, 33126	□Remove
			□Add
			□Remove
		4	□Change
			□Add
			□Remove
			□ Change
<del></del>			□Add
			□Remove
			□Change
			□Add
			□Remove
			(7) Channe

				<del></del>	
		-14			
<del>~~=+-</del>					
					; <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
				<u></u> .	<del></del>
·	- 1			-	
			, ,		
<del></del>			·		
			<del></del>		
					<del></del>
Note: If ti	date, if other than the date redate is listed, the date must be sp he date inserted in this block do s effective date on the Departn	oes not meet the applic	cable statutory filing rec	(optional) nan 90 days after filmg.) Po prirements, this date wi	irsuant to 605,0207 If not be listed as
	ecifies a delayed effective date.	, but not an effective t	ime, at 12:01 a.m. on th	e earlier of: (b) The 9	0th day after the
rd is filed.	N 23	2024	<del></del> :		
rd is filed.	.Y 23	Morale			
rd is filed.	.Y 23	Morale	ovized representative of a	niember	

Filing Fee: \$25.00