

621000122553

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

(((H23000063029 3)))

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.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : YOUR DREAM SERVICES CORP.
Account Number : I20200000137
Phone : (786)660-0108
Fax Number : (786)364-1047

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

Email Address: info@yourdreamms.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GROMERO CONSULTANT, LLC

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: GROMERO CONSULTANT, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GONZALO, ROMERO F

Name of Person

Gonzalo Romero

Firm/Company

16909 N BAY RD APT 212 S

Address

UNNY ISLES BEACH, FL 33160

City/State and Zip Code

Grfromero@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GONZALO ROMERO

786

6127410

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(((H23000063029 3)))

GROMERO CONSULTANT, 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 03/24/2021 and assigned
Florida document number L21000122553.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

5990 NE 4TH CT

(Principal office address MUST BE A STREET ADDRESS)

APT 5

MIAMI FL 33137

Enter new mailing address, if applicable:

5990 NE 4TH CT

(Mailing address MAY BE A POST OFFICE BOX)

APT 5

MIAMI FL 33137

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

GONZALO, ROMERO F

New Registered Office Address:

5990 NE 4TH CT APT 5

Enter Florida street address

MIAMI FL

Florida 33137

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.

Gonzalo Romero
If Changing Registered Agent, Signature of New Registered Agent

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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

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GONZALO, ROMERO F	16909 N BAY RD APT 212 S	<input type="checkbox"/> Add
		UNNY ISLES BEACH, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GONZALO, ROMERO F	5990 NE 4TH CT	<input checked="" type="checkbox"/> Add
		APT 5	<input type="checkbox"/> Remove
		MIAMI FL 33137	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ANY ALL LEGAL IN THE USA

E. Effective date, if other than the date of filing: _____ (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed

Dated FEBRUARY 17, 2023

Gonzalo Romero
Signature of a member or authorized representative of a member

GONZALO ROMERO

Typed or printed name of signee

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Filing Fee: \$25.00