# L2100016968

(F	Requestor's Name)	
4)	Address)	
(F	Address)	
(0	City/State/Zip/Phone #	<i>i</i> )
PICK-UP	WAIT	MAIL
(E	Business Entity Name	)
(0	Occument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status				
LTD Partnership File Foreign Corp. File L.C. File L.C. File Ficitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record Requested by: UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Search UCC 11 Retrieval	Lynkia LLC			
LTD Partnership File Foreign Corp. File L.C. File L.C. File Ficitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Fictitious Search Vehicle Search Driving Record Requested by: UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Search UCC 11 Retrieval				
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Trade/Service Mark				L.C. File
Merger File				Fictitious Name File
Art. of Amend. Fite				Trade/Service Mark
RA Resignation				Merger File
Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record Requested by: UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Search UCC 11 Retrieval				Art. of Amend. File
Annual Report / Reinstatement  Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record Requested by: UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval				RA Resignation
Cert. Copy				Dissolution / Withdrawal
Photo Copy				Annual Report / Reinstatement
Certificate of Good Standing  Certificate of Status  Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Search  Fictitious Owner Search  Vehicle Search  Driving Record  Requested by:  UCC 1 or 3 File  UCC 11 Search  UCC 11 Retrieval				Cert. Copy
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Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Search  Fictitious Owner Search  Vehicle Search  Driving Record  Requested by:  UCC 1 or 3 File  UCC 11 Search  UCC 11 Retrieval				Certificate of Good Standing
Corp Record Search				Certificate of Status
Officer Search				Certificate of Fictitious Name
Fictitious Search				Corp Record Search
Fictitious Owner Search				Officer Search
Vehicle Search				Fictitious Search
Vehicle Search	Signature			Fictitious Owner Search
Requested by:        UCC 1 or 3 File	J.g.iati.i.e			Vehicle Search
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172 Penger's Printing - Thom saves GA 8/00			Up	Courier

## COVER LETTER

Registration Section

TO:

Division of Co	rporations		
LYNKIA	LI.C		
SUBJECT:	Name of Lim	ted Liability Company	
The analogui Artislas a	FAd	mitted for filing	
	f Amendment and fee(s) are sub		
Please return all corresp	ondence concerning this matter	to the following:	
	LUISA ELENA CUADRA	NDO	
		Name of Person	
	DIEGO L. RESTREPO, P.	Α.	
		Firm/Company	
	2600 SOUTH DOUGLAS	ROAD, SUITE 913	_
		Address	
	CORAL GABLES, FLOR	IDA 33134	
	LUIGA ON FORTH FROM AN	City/State and Zip Code	
	LUISA@RESTREPOLAW  E-mail address: (	to be used for future annual report no	tification)
For further information	concerning this matter, please concerning	all:	
LUISA ELENA CUAI	DRADO	305 447-9430 at ()	
Name	of Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 127	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	orporations

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LYNKIA LLC				
(Name of the Limited	Liability Comp Florida Limited	any as it now appears on ( Liability Company)	our records.)	
The Articles of Organization for this Limited Liab Florida document number 1.21000169688	bility Company	were filed on 4/12/20	21	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liab	oility company here:		
NA				
The new name must be distinguishable and contain the wor	ds "Limited Liab	ility Company," the design	ation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		NA		<u></u>
(Principal office address MUST BE A STREET	ADDRESS <sub>I</sub>			72
Enter new mailing address, if applicable:		NA		
(Mailing address MAY BE A POST OFFICE BOX)				9 51 FEW 54
B. If amending the registered agent and/or regagent and/or the new registered office address		address on our recor	ds, <u>enter the na</u>	me of the new register
Name of New Registered Agent:	NA			
New Registered Office Address:	NA			
-		Enter Florida si	treet 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 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	ANDRES ESCOBAR URIBE	4110 NE 29TH AVE	₹Add
		FORT LAUDERDALE, FLORIDA 33308	□Remove
			🗀 Add
			□ Remove
			□ Change
			🗀 Add
			Remove
			🗆 Change
<del></del>			🗀 ∧dd
			□Remove
			□Change
·			🗀 Add
			□Re:nove
			□Change
			□Add
			□Remove
			□ Change

ffec	tive date, if other than the date of filing:
fan c Note:	ffective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ment's effective date on the Department of State's records.
	and 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 filed.
G 13 1	neu.
Dated	MARCH 18 2022
	(1ego 18)
	Signature of a siember of author, of sepresentative of a member

Filing Fee: \$25.00