## L21000200263

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## **COVER LETTER**

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TO:	Registration Se Division of Cor			
411D IT		DORAL LLC	,	
SUBJE	C1:		ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		SAMUEL LONDONO		
			Name of Person	
		SAMUEL LONDONO, P.,	Α.	
			Firm/Company	
		2940 NW 99TH PL		
			Address	
		DORAL, FL 33172		
			City/State and Zip Code	
		SAMUEL@SAMLONDON		
		E-mail address: (	to be used for future annual report not	ification)
For furth	ner information c	oncerning this matter, please c	all:	
SAMUE	EL LONDONO		407 435 - 9507 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	d is a check for th	he following amount:		
<b>■</b> \$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 5		<u>Street Address:</u> Registration Se	ction
	Division of C		Division of Co	
	P.O. Box 632	27	The Centre of T	Fallahassee
	Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRUDOS DORAL, LLC				
( <u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)			
The Articles of Organization for this Limited Liability Com- Florida document number $\frac{1.21000200263}{1.21000200263}$	npany were filed on April 29, 2021 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	I liability company here:			
·	Liability Company," the designation "LLC" or the abbreviation "L.L.C."  3905 NW 107TH AVE			
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRES</u>	LINES LOS			
Francipal office address MOST BE A STREET ADDRES	DORAL, FL 33178			
Inter new mailing address, if applicable:	3905 NW 107TH AVE			
Mailing address MAY BE A POST OFFICE BOX)	UNIT 105			
	DORAL, FL 33178			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:  JHON MA	ffice address on our records, <u>enter the name of the new regis</u>			
New Registered Office Address: 7705 NW	46TH ST			

## 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.

City

MIAMI

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida 33166

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	JCPI GROUP LLC	3905 NW 107TH AVE	□Add
		UNIT 105	■ Remove
		DORAL, FL 33178	Change
AMBR	FENIX AEROSPACE LLC	7705 NW 46TH ST	■Add
		MIAMI, FL 33166	
			□ Change
		-	
			□Remove
			□ Change
		· · · · · · · · · · · · · · · · · · ·	
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fan effectiv	date is listed, the	e date must be s	specific and can	not be prior to da	te of filing or more	than 90 days after	filing.) Pursuant to 605.0	0207
locument's	e date inserted effective date	on the Depart	ment of State	's records.	statutory ming to	equirements, uns	date will not be listed	u as
record spe d is filed.	eciñes a delaye	d effective dat	e, but not an c	effective time,	at 12:01 a.m. on	the earlier of: (b)	The 90th day after	the
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Dated		-	<del></del>					
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