

# L21000201199

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

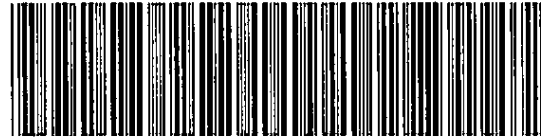
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700370366167

08/30/21--01036--006 \*\*25.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL

2021 AUG 20 PM 1:53

D. BRUCE  
AUG 31 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 AUG 24 AM 11:23

July 27, 2021

JORGE NEMI  
3029 NE 188TH STREET, STE 818  
AVENTURA, FL 33180

SUBJECT: 10X SALES LLC  
Ref. Number: L21000201199

We have received your document for 10X SALES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce  
Corporate Records Supervisor II

Letter Number: 021A00017483

SECRETARY OF STATE  
TALLAHASSEE, FL

2021 AUG 20 PM 1:53

FILED

**COVER LETTER**

RECEIVED

2021 JUN 29 PM 2:16

TALLAHASSEE, FL

TO: Registration Section  
Division of Corporations

SUBJECT: 10X SALES, 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:

JORGE NEMI

Name of Person

Firm/Company

3029 NE 188TH STREET SUITE 818

Address

AVENTURA, FL 33180

City/State and Zip Code

GEORGENEMI@ICLOUD.COM

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

For further information concerning this matter, please call:

JORGE NEMI

954 793-0630  
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

SECRETARY OF STATE  
TALLAHASSEE, FL

2021 AUG 20 PM 1:53

FILED

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

10X SALES, 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 04/30/2021 and assigned  
Florida document number 1.21000201199.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

20335 W. COUNTRY CLUB DRIVE #2504

AVENTURA, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3029 NE 188TH STREET #818

AVENTURA, FL 33180

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:

G&G SPECTRUM, INC

New Registered Office Address:

20335 W. COUNTRY CLUB DRIVE #2504

*Enter Florida street address*

AVENTURA


*City*

Florida 33180

*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>	<u>Address</u>	<u>Type of Action</u>
AMBR	DANIEL VALENCIA	5986 MONTERRA CLUB DR	<input checked="" type="checkbox"/> Add
		LAKE WORTH, FL 33464	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JORGE M. NEMI	3029 NE 188TH STREET APT 818	<input checked="" type="checkbox"/> Add
		AVENTURA FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DANIEL VALENCIA	5986 MONTERRA CLUB DR	<input type="checkbox"/> Add
		LAKE WORTH, FL 33464	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2021 AUG 20 PM 1:54  
 RECEIVED  
 TALLAHASSEE, FL  
 ADD  
 REMOVE  
 CHANGE

FILED

SECRET  
TALLAHASSEE, FL

SECRET  
TALLAHASSEE FL

2021 AUG 20 PM 1:54

77-100

(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)

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.

2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**