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(Business Entity Name)	
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CORPORATE ACCESS, _____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

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2	FILING	LLC AMEND
	ALBERTO AMAYA LLC CORPORATE NAME AND DOCUMEN	VT. #/
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALBERTO AMAYA LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records. imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L21000209782	nipany were filed on 05/05/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.E.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	7821
-		·
		7 2
Enter new mailing address, if applicable:		0
(Mailing address MAY BE A POST OFFICE BOX)		= 17
Matting duaress MAT BE AT OST OFFICE BOX		2
		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter t</u> l	he name of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	-
	Flor	rida
	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
AMBR	SILVIO HERNANDEZ	20545 SW 120 AVE	□Add
		MIAMI, FL 33177	□Remove
			■ Change
MGR ALB	ALBERTO AMAYA	1398 W 84 ST	•Add
		HIALEAH, FL 33014	□Remove
			□ Change
			□Add
			Change
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i effect <u>te:</u>	date, if other than the date of filing:	5.020 ted as
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
ed		
	Alberto Amaya Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00