

L21 000 269 861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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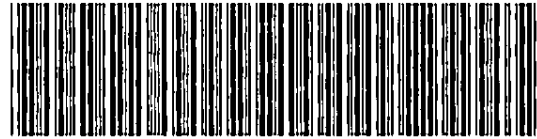
(Business Entity Name)

(Document Number)

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2022 SEP 27 AM 10:49

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ESCANDON & MENDIETA GROUP 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:

JEAN CARLOS BALCAZAR
Name of Person
ESCANDON & MENDIETA GROUP LLC
Firm Company
8016 NW 105TH CT
Address
DORAL, FL 33178
City/State and Zip Code
gues81@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEAN CARLOS BALCAZAR at (646) 891-7897
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

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

ESCANDON & MENDIETA GROUP 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 06/10/2021 and assigned
Florida document number L21000269861

This amendment is submitted to amend the following:

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

ESCANDON & HERNANDEZ GROUP LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

8016 NW 105TH CT

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8016 NW 105TH CT

DORAL, FL 33178

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:

New Registered Office Address:

8016 NW 105TH CT

Enter Florida street address

DORAL

Florida

33178

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MENDIETA VARGAS, JOSE F	6355 NW 36TH ST., SUITE 407	<input type="checkbox"/> Add
		VIRGINIA GARDENS, FL 33166	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Maritza Hernandez Cedeño	8016 NW 105TH CT	<input checked="" type="checkbox"/> Add
		DORAL, FL 33178	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Escandon Perafan, Guillermo	8016 NW 105TH CT	<input type="checkbox"/> Add
		DORAL, FL 33178	<input type="checkbox"/> Remove
			<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


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

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FBI
AUG 27 2022

E. Effective date, if other than the date of filing: AUGUST 25 2022 (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 (2007) (a)(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 AUGUST 25 2022


Signature of a member or authorized representative of a member

GUILLERMO ESCANDON PERAFAN

Typed or printed name of signer

Filing Fee: \$25.00