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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GOYENECHEA PROFESSIONAL SERVICES LLC

Account Number : I2019000078 Phone : (561)341-1582

Fax Number : (561)264-6286

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

2022 OCT -4 AM 10: 42 .

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DEVELOPMENT ARG LLC

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COVER LETTER

10:	Division of Corp			
erin it	cer.		PMENT ARG LLC	
SOBJE	CT:		ited Liability Company	
The end	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
			PABLO E GOYENECHEA	
			Name of Person	
		GOYENEO	CHEA PROFESSIONAL SERV	TICES LLC
			Firm/Company	
		3175 S C	ONGRESS AVE, SUITE 305-0	
			Address	
		PALM	I SPRINGS, FLORIDA 33461	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
			admin@gpscontador.com	
			to be used for future annual report	notification)
For fur	ther information co	oncerning this matter, please c	al!:	
	PABLO E	GOYENECHEA	561 at ()	341-1582
	Name o	l'Person	at () Area Code Day	time Telephone Number
Enclose	ed is a check for th	ne following amount:		
≅ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7		Section Corporations of Tallahassee proe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MENT ARG LLC			
(Name of the Limited Liability (A Florida L.	Company as it now appears imited Eiability Company)	on aur records.)		
The Articles of Organization for this Limited Liability Con Plorida document number	npany were filed on	06/28/2021	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	d liability company her	<u>c</u> :		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the des	ignation "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applicable:	<u></u>	<u></u> .		
(Principal office address MUST BE A STREET ADDRE	<u> </u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our re	cords, <u>enter the nam</u>	e of the new registered	
Name of New Registered Agent:	GPS	CONTADOR	 	
New Registered Office Address:	3175 S CONGRESS AVE. SUITE 305-C			
new registered Office readings.	Enter Florida street address			
	PALM SPRINGS	, Florida	33461	
	Сцу		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.

Pablo Goyenechea

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	DI PARDO, NICOLAS	4647 WINDWARD COVE LN	
		WELLINGTON, FL 33449	≡ Remove
			□Change
MGR, AMBR	SARTORI, JOSE L	4647 WINDWARD COVE LN	Dbdd
		WELLINGTON, FL 33449	□Remove
			🗆 Add
			□Remove
			□ Change
			🗆 Add
			Remove
			⊡Change
			□ Add
			Remove
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ote: If the	ite, if other than the date of date is listed, the date must be spe- date inserted in this block dox effective date on the Department	es not meet the applical	o date of filing or more to ble statutory filing re	(optional) han 90 days after filing.) Pu quirements, this date wil	rsuant to 605.029 I not be listed a
record spec is filed.	cifies a delayed effective date.	but not an effective tim	ie, at 12:01 a.m. on th	ne earlier of: (b) The 90	Oth day after th
ited	October 3th	2022	_•		
		Nicola	s Di Pardo		
		· · · · · · · · · · · · · · · · · · ·			
_	Signate	are of a member or author	ized representative of a	member	