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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO:

TO:	Registration Sc Division of Cor				
	1.0	Mi	REAFORT LLC		
SUBJE	(C1:	Name of Lim	ited Liability Company		
		••			
The eac	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Picase i	return all correspo	indence concerning this matter	to the following:		
			:	,	
JUANA BRAZOBAN FORTUNATO					
Name of Person					
· MIRLAFORT LLC					
Firm Company					
5437 PINE CHASE DR APT 6					
Address					
			ORLANDO, FL 32808		
City/State and Zip Code					
juana29.brazoban@gmail.com					
		E-mail address; (to be used for future annual report no	otalication)	
For furt	her information c	oncerning this matter, please co	all:		
JUANA BRAZOBAN FORTUNATO			954 397-1787		
	Name o	f Person		me Telephone Number	
Enclose	ed is a check for th	ne following amount:			
≅ \$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	CI \$55.00 Filing Fee & Certified Copy radditional 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			Street Address:	dina	
		Registration S Division of Co			
			The Centre of		
	Tallahassee, I			roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEEC	
nny as it now appears on our records.) Liability Company)	
were filed on07/06/2021	and assigned
oility company here:	
lity Company," the designation "ELC" or the abl	
JUANA BRAZOBAN FORTUNATO	3
5437 PINE CHASE DR APT 6	<u> </u>
ORLANDO, FL 32808	r\s
	<u> </u>
JUANA BRAZOBAN FORTUNATO	
5437 PINE CHASE DR APT 6	
ORLANDO, FL 32808	
address on our records, <u>enter the nam</u>	e of the new regi
Enter Florida street address	
, Florida	
City	Zip Code
	ility company here: lity Company," the designation "LLC" or the abit JUANA BRAZOBAN FORTUNATO 5437 PINE CHASE DR APT 6 ORLANDO, FL 32808 JUANA BRAZOBAN FORTUNATO 5437 PINE CHASE DR APT 6 ORLANDO, FL 32808 JUANA BRAZOBAN FORTUNATO 5437 PINE CHASE DR APT 6 ORLANDO, FL 32808 address on our records, enter the name

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

Title	Name	Address	Type of Action
MS	JUANA BRAZOBAN FORTUNA	5437 PINE CHASE DR APT 6, ORLANDO, FL 328	
			⊟Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			F)Chances

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ARTICLE VI BUSINESS ACTIVITY: TO PROVIDE PERSONAL LOANS AND RELATED ACTIVITIES WITH FINANCIAL LOANS IN ACCORDANCE TO STATE OF FLORIDA AND FEDERAL REGULATIONS. ADDITIONALLY, BUSINESS MAY PERFORM COLLECTION ACTIVITIES RELATED TO PERSONAL LOANS THAT MIGHT BE DEEMED UNPAID OR DELINQUENT. BUSINESS MAY ALSO SUBCONTRACT OR OUTSOURCE THESE AFOREMENTIONED ACTIVITIES WITH THIRD PARTY THAT ARE LEGALLY OPERATING. E. Effective date, if other than the date of filing:

[Han officion date in the last of th (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 695,0207 (3)(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.

rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day affilied.

AUGUST 18TH

2023

Signature of a member or authorized representative of a member

JUANA BRAZOBAN FORTUNATO

Typed or printed name of signee

Filing Fee: \$25.00