8/30/2021

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000323805 3)))



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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : PROMINENT SERVICES INC

Account Number : I20150000063 : (305)889-2880 Fax Number : (305)889-2881

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COMPUTER SOLUTIONS MIA, LLC

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COVER LETTER

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TO:

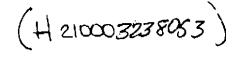
Registration Section

Div	ision of Co	rporations	•		;
CUBIECTO.	COMPUT	ER SOLUTIONS MIA, LLC		•	
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		OSMEL O. OLAYON			
			Name of Person	•	
		COMPUTER SOLUTION	IS MIA, LLC		202
Firm/Company					
7951 SW 152 AVE APT 8				636	
			Address		P P
		MIAMI, FL 33193			7. 7.
		OSMEL.OLAYON@GMA	City/State and Zip Code IL.COM to be used for future annual re	port notification)	2021 AUG 30 PH 2: 24 SELECTION OF THE PROPERTY OF THE PROPERT
For further in	nformation c	concerning this matter, please o	all;		
OSMEL OL	AYON			1735	
	Name o	f Person	at () Area Code	Daytime Telephone I	Yumber
Enclosed is a	check for th	ne following amount:			
\$ 25.00 F	lling Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Co sed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy ditional copy is enclosed)
Reg	ling Addres	Section		ion Section	
	ISION OF C	orporations		of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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



COMPUTER SOLUTIONS MIA, LL	С		
(Name of the Limited (A	Liability Compa Florida Limited	iny as it now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited Liab	oility Company	were filed on 07/09/20	21 and assigned
Florida document number L21000315677			
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited llab	ility company here:	
The new name must be distinguishable and contain the work	ds "Limited Liabi	lity Company," the designa	lion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	7951 SW 152 AVE A	PT 8
(Principal office address MUST BE A STREET	ADDRESS)	MIAMI, FL 33193	
Enter new mailing address, if applicable:		7951 SW 152 AVE A	PT 8
(Mailing address MAY BE A POST OFFICE BO	0X)	MIAMI, FL 33193	
B. If amending the registered agent and/or reg agent and/or the new registered office address in Name of New Registered Agent:			s, <u>enter the name of the new regi</u> s
	7951 SW 152 A	VF APT 8	
New Registered Office Address:	7,50,000	Enter Florida stra	eet address
	MIAMI,		, Florida <u>33193</u>
		City	Zip Code
New Registered Agent's Signature, if changing Reg	istered Agent:		

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

210003238053

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>	Name	Address	Type of Action
PRESIDE	OLAYON, OSMEL O, SR	7951 SW 152 AVE APT 8	🖸 Add
		MIAMI, FL 33193 ES	■Remove
			□Change
MBR	OLAYON, OSMEL O	7951 SW 152 AVE APT 8	≅Add
		Miami, FL 33193	□Remove
			Change
			🗆 Add
			□Remove
			Change
			DAdd
			□Remove
			□ Change
			□Add
			□Remove
			□Add
			Remove
		(4) 210002238	□Change

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e date, if other than the date of f tive date is listed, the date must be specific the date inserted in this block does r it's effective date on the Department	c and cannot be prior to date of filing not meet the applicable statutory	optional or more than 90 days after filin filing requirements, this dat	g.) Pursuant to 605.02
specifies a delayed effective date, but 1.	not an effective time, at 12:01 a	.m. on the earlier of: (b)	The 90th day after th
August 30	2021		
, , , , ,	of a member or authorized represents	alive of a member	
Signature	7		
Signature of OLAYON, OSMEL O.	O		

Filing Fee: \$25.00