

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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)))



H210003238053ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PROMINENT SERVICES INC
Account Number : I20150000063
Phone : (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.****

Email Address: osmel.olayona@gmail.com

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

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2021 AUG 30 PM 1:26

TALLAHASSEE, FLORIDA

2021 AUG 30 PM 2:24

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

(H 210003238053)

TO: Registration Section
Division of Corporations

SUBJECT: COMPUTER SOLUTIONS MIA, 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:

OSMEL O. OLAYON

Name of Person

COMPUTER SOLUTIONS MIA, LLC

Firm/Company

7951 SW 152 AVE APT 8

Address

MIAMI, FL 33193

City/State and Zip Code

OSMEL.OLAYON@GMAIL.COM

E-mail address: (to be used for future annual report notification)

FILED
2021 AUG 30 PM 2:24
STATE OF FLORIDA
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

OSMEL OLAYON

786

613-1735

at ()

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 32314Street Address:Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(H 210003238053)

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

(H 210003238053)

COMPUTER SOLUTIONS MIA, 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 07/09/2021 and assigned
Florida document number L21000315677.

This amendment is submitted to amend the following:

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

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:

7951 SW 152 AVE APT 8

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33193

Enter new mailing address, if applicable:

7951 SW 152 AVE APT 8

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33193

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:

OLAYON, OSMEL O

New Registered Office Address:

7951 SW 152 AVE APT 8

Enter Florida street address

MIAMI,

City

Florida 33193

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.

Osmei Olayon

If Changing Registered Agent, Signature of New Registered Agent

(H 210003238053)

(H 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PRESIDE	OLAYON, OSMEL O, SR	7951 SW 152 AVE APT 8	<input type="checkbox"/> Add
		MIAMI, FL 33193 ES	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	OLAYON, OSMEL O	7951 SW 152 AVE APT 8	<input checked="" type="checkbox"/> Add
		Miami, FL 33193	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

(H 210002238053)

(H210003238053)

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

Please include FE/EIN if possible:
87-1608782

2021 AUG 30 PM 1:25
SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08/11/2010 BY 60322
UCBAW

FILED

E. Effective date, if other than the date of filing: 07/09/2021 (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 605.0207 (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.

Dated August 30, 2021

Osmel Olayon
Signature of a member or authorized representative of a member

OLAYON, OSMEL O.

Typed or printed name of signee

(H210003238053)