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COVER LETTER

TO:

	egistration Se ivision of Cor			
and the car	CERIE, LL	C		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		Andres Hernandez, Esq.		
			Name of Person	
		HERO CONSULTING, L	LC	
			Firm/Company	
		3627 Torremolinos Ave		
			Address	
		Doral, FL 33178		
			City/State and Zip Code	
		ANDRESHERNANDEZL(
For further	information o	E-mail address: (oncerning this matter, please c	to be used for future annual report not	itheation)
ANDRES	HERNANDE		770 3145596 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	s a check for th	ne 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)
	lailing Addres		<u>Street Address:</u> Registration Sc	ection
	ivision of C		Division of Co	
	.O. Box 632		The Centre of	
I	allahassee. I	·1. 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CERIE, LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records. oility Company))
The Articles of Organization for this Limited Liability Company we Florida document number 1.21000317608		and assigned
forida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
-		
		29
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
-	<u> </u>	- 2
3. If amending the registered agent and/or registered office add	tress on our records, enter t	he name of the new registe
gent and/or the new registered office address here:	gress on our records, <u>enter a</u>	ite name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floi	
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	VLADIMIR JOSE SILVA NINO	988 E MICHIGAN ST, APT B	= Add
		ORLANDO, FL 32806	□Remove
			□Change
			□Add
			□Remove
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			□Add 29 □Remove AH 10 □Change
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effectiv	ve date is liste	d, the date must ted in this bloc	e specific and	cannot be prior	to date of filing	or more than 90	days after fil	ling.) Purs	uant to 605.02
ument	s effective of	late on the Dep	artment of St	ate's records		g .equi.e.			
cord sr	waities a del	ayed effective	date but not	an effective t	ime at 12:01 s	om on the ear	lier of: (b)	The 90tl	n day after ti
s filed.		ayed effective	uaic, but not	air criccity c	mne, at 12.01 t	i.m. on the car	ner (11. (0)	1110 700	ray arer a
JU	LY 27			2021					
ed <u></u>		<u>)</u>	N V						
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Typed or printed name of signee