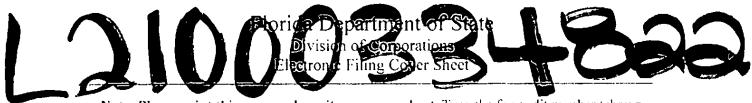
Page: 2 of 6

2021-09-13 05:46.39 PDT

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Division of Corporations



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUGO DIGITAL PRODUCTS & SERVICES COMPANY LLC

Certificate of Status	0
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## **COVER LETTER**

TO: Re	gistration Sect cision of Corpo	tion orations		
		TAL PRODUCTS & SERVIC	ES COMPANY LLC	
SUBJECT:	· · · · · · · · · · · · · · · · · · ·	Name of Limi	ted Liability Company	
		mendment and fee(s) are subr		
		Cheyenne Moseley		
			Name of Person	50 3
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			Firm/Company	
		101 N Brand Blvd 11th Fi		2 0
			Address	
		Glendale, CA 91203		TELL ED
		carlosraf44@gmail.com	City/State and Zip Code	
		E-mail address: ()	o be used for future annual report notif	ication)
For further	information co	ncerning this matter, please ca	ll:	
Cheyenne ?	Moseley		800 773-0888	
	Name of	Person	Area Code Daytimo	e Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 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, F1, 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUGO DIGITAL PRODUCTS & SERVICES COMPANY 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
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:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
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:
New Registered Office Address:  Enter Florida street address
, Florida
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

AMBR ROJAS LUGONES, CARLOS A. 8731 WHISPERWOOD CT.
88731 TAMPA, PL 33635 Add

Remove Add

Remove Add

Remove Add

Add

Remove Add

	LI Remove
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