## 21 000349845

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(	
(Document Number)	
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	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub indence concerning this matter	_	<b>}</b>	, ¥
	OLGA I., ARANGO ECH	EVERRY		
	Name of Person			
	EXCHANGE MONEY M	ILLENIUM L.I.C		
		Firm/Company		
	17030 COLLINS AVE.			
		Address		
SUNNY ISLES, FLORIDA 33160				
		City/State and Zip Code		350851 350851
	SUNNYENVIOS2022@GI			
	E-mail address: (	to be used for future annual report not	ification)	٠,
For further information of	concerning this matter, please c	all:		1.00
OLGA L. ARANGO EC	THEVERRY	786 486-5667		
Name o	of Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address Registration	Section	Street Address: Registration Se		
Division of C	Corporations	Division of Co.	rporations	

P.O. Box 6327 Tallahassee, FL 32314

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

## EXCHANGE MONEY MILLENNIUM 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 L	iability Company	were filed on AUGUST 01	, 2021 and	assigned	
Florida document number L21000349845					
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name o	of the limited liah	oility company here:			
N/A					
The new name must be distinguishable and contain the	words "Limited Liabi	lity 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)		17030 COLLINS AVE. SUNNY ISLES, FL 33160			
<b></b>		17030 COLLINS AVE.	ACRE!	72 DEC	
Enter new mailing address, if applicable:				<del></del> :	
(Mailing address MAY BE A POST OFFICE	BOX)	SUNNY ISLES, FL 33160	··. ·		
B. If amending the registered agent and/or a	ragistarud affica	addraes on our records on	r =	- <del></del>	
agent and/or the new registered office addre		audress on our records, <u>er</u>	nter the name of the	<u>nevěteřiztet ét</u>	
Name of New Registered Agent: MIRIAM ARA		ANGO			
New Registered Office Address:	17030 COLLIN	SS AVE.			
	Enter Florida street address				
SUNNY ISL		S	, Florida 33160 Zip Co		
		City	Zip Co	de .	
New Registered Agent's Signature, if changing	<u> Registered Agent:</u>				
I hereby accept the appointment as registere provisions of all statutes relative to the prop	ed agent and agr per and complete	ce to act in this capacity. performance of my duties	I further agree to co s, and I am familiar	mply with the 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.

<u>title</u>	Name	Address	1 vpe of Action
MGR	MIRIAM ARANGO	17030 COLLINS AVE.	
		SUNNY ISLES, FL 33160	□Remove
		<del></del>	□Change
MGR	OLGA L. ARANGO ECHEVERRY	950 S PINE ISLAND RD.	
		STE. A150 1010	Remove
		PLANTATION, FL 33324	□Change
			Cl Add
			🗆 Remove
<del></del>			20 DEC ORemove
			□Remove
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					<b></b>	:
E. Effective	date, if other than the dat	z of filine:	ER 01, 2022	(optional	)	:
{ f an effec   <u>Note:</u>   If	ive date is listed, the date must be the date inserted in this block	specific and cannot be prior does not meet the applic	r to date of filing or more cable statutory filing re	than 90 days after filing equirements, this dat	g.) Pursuant to 605 e will not be list	5,0207 (3)(h) ed as the
documen	t's effective date on the Depar	tment of State's records	i.		π <b>Φ</b>	
If the record : record is filed	specifies a delayed effective da l.	te, but not an effective t	ime, at 12:01 a.m. on	the carlier of: (b) T	The 90th day afte	r the
, D	ECEMBER 01	2022				
Dated _	<del></del>		·			
	(	(2/2)				
	Sign	nature of a member or auth	orized representative of	a member	· · · · · · ·	
	OLGA L. ARANGO ECHE	VERRY - MGR				
			ted name of signee	. <del></del>	<del> </del>	

Filing Fee: \$25.00