

COVER LETTER

TO:	Registration Section
	Division of Corporations

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SUBJECT:

Tallahassee, FL 32314

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:

	DIEGO FIGUEROA			
Name of Person				
	E & F LATIN ACCOUNTING			
	Firm/Company			
1820 N CORPORATE LAKES BLVD STE 109 Address				
	WESTON FL 33326			
City/State and Zip Code				
	DIEGO@EFLATINACCO	UNTING.COM		
	E-mail address:	(to be used for future annual report notif	lication)	
For further information of	concerning this matter, please c	all:		
DIEGO FIGUEROA		954 384 8565		
Name of Person		Aren Code Daytim	e Telepho	ne Number
linclosed is a check for t	he following amount:			
	\$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 exclused)
Mailing Address Registration		<u>Street Address:</u> Registration Sec	tion	
Division of Corporations		Division of Cor	poratio	
P.O. Box 6327		The Centre of T	allahass	see

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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/14/21 11:51AM PDT '9543024976' -> 18506	176383	Pg 4/6
ARTICLES OF	AMENDMENT O	
	DRGANIZATION	
)F	1011
CUCL FAMILY LLC		1011 01.1
(Name of the Limited Liability Compt (A Florida Limited	inv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>08/13/2021</u>	and assigned
Florida document number L21000364849		26
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ollity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	Ility Company," the designation "LLC" or the al	breviation "L.L.C."
Enter new principal offices address, if applicable:	2665 EXECUTIVE PARK DR	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 2	
	WESTON FL 33331	·

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

SUITE 2

2665 EXECUTIVE PARK DR.

WESTON FL 33331

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:	E&F LATIN GROUP LLC		
New Registered Office Address:	1820 N CORPORATE LAKES BLVD STE 109		
	Enter Floridu street address		
	WESTON	, Florida <u>33326</u>	
	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.

> leyo Ticheroa. If Changing Registered Agest, Signature of New Registered Agent

Pg 5/6

If smending 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
MGR	NESTOR ALDEMAR CUEVAS	2665 EXECUTIVE PARK DR	□Add
		SUITE 2	CRemove
		WESTON FL 33331	
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			Change
			□ Add
			🖸 Remove
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			[] \dd
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			🗅 Add
			□Remove
			(D)Change
			[]^dd
			CRemove
		·	Change

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

E. Effective date, if other than the date of filing: (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 specifics 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.

10/06/2021

OCTUBRE 06 2021 Signature of a symbol of authorized representative of a member NESTOR ALDEMAR CUEVAS

Typed or printed name of signee.