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Department of State

Division of Corporations

Date: 11/01/2021

American Expediting (Stealth Courier)

1531 Commonwealth Business Dr.

Ste 105

Taliahassee, Fl. 32303

850-294-5632

Stealth Courier Box

Company: Roquete Yindo LLC

Requester: USA Gestiones

Order: 13531031

COVER LETTER

TO: Registration ! Division of Co			
ROQUET	E YINDO, LEC		
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
	Luis M Poyato		
		Name of Person	
	USA Gestiones, LLC		
		Firm/Company	
	990 Biscayne Blvd, Ste. 5	01-16	
		Address	
	Miami, FL 33132		
	empresas@usagestiones.co		
		(to be used for future annual report not	ification)
For further information	concerning this matter, please o	rall:	
Luis M Poyato		305 965-6948 at (
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	the 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 Addres Registration S		<u>Street Address:</u> Registration Sec	etion
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROQUETE YINDO, 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 $\frac{08/23/2021}{1}$ __ and assigned Florida document number L21000378177 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 2165 RYER AVE. APT, 2B BRONX, NY 10457 (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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	VALENZUELA, LEONTE	2167 RYER AVE #2B	□Add
		BRONX, NY 10457	■Remove
			□Change
MBR	VALENZUELA, LEONTE	2165 RYER AVE. APT. 2B	■Add
		BRONX, NY 10457	□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			□ Add
			Remove
			□Change
			□Add
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Sote: 1	e date, if other than the date of filing:
record Lis file	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 l.
ated _	10/29/2021
	Signature of a member or antifolyed representative of a member

Filing Fee: \$25.00