

Florida Department of State H220000016443
Division of Corporations
Electronic Filing Cover Sheet

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((H220000016443))



H220000016443ABCT

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SACONSA GROUP LLC
Account Number : I20200000187
Phone : (786)757-2436
Fax Number : (786)513-5977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INVERSIONES RADIALES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 JAN -3 PM 1:47

FILED

2022 JAN -3 PM 1:24
FILED
TALLAHASSEE, FLORIDA
DIVISION OF STATE

COVER LETTER H220000016443

**TO: Registration Section
Division of Corporations**

SUBJECT: INVERSIONES RADIALES LLC
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:

JESUS LEON
Name of Person
SACONSA GROUP LLC
Firm/Company
3625 NW 82 Avenue Suite 100-K
Address
DORAL, FL 33166
City/State and Zip Code
JESUSLEONTERAN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS LEON 786 7572436
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the 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)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

H220000016443

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H220000016443

INVERSIONES RADIALES 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 08/24/2021 and assigned Florida document number L21000378213.

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:

(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

City

FILED
2022 JAN -3 PM 11:24
STATE OF FLORIDA
TALLAHASSEE, FLORIDA
Sec. of State

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

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Bermudez Zuleta, John F	310 REDWOOD LN	<input checked="" type="checkbox"/> Add
		KEY BISCAYNE, FL 33149	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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