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(Requ	iestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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A. BUTLER MAR 14 2022

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
0.110.10.00		CIONES ASMAN GROUP 25	LLC .	•
SUBJECT:	•		ited Liability Company	•
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	ali correspo	ndence concerning this matter	to the following:	
		SHAWILDA VELASQUE	:Z	
			Name of Person	
		IMPORTACIONES ASM	AN GROUP 25 LLC	
			Firm/Company	
		19370 COLLINS AVE 10	14	
			Address	
		SUNNY ISLES BEACH, I	FL 33160	
		USTUEMPRESA@GMAII	City/State and Zip Code	
			to be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please c	all:	
SHAWILDA	VELASQU	JEZ	786 340-0372	
	Name of	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)
Reg Div P.O	ding Address gistration S vision of Co D. Box 632 lahassec, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

IMPORTACIONES ASMAN GROU	JP 25 LLC		2022 MAR -4 PM 1: 15
(Name of the Limite) (In the Articles of Organization for this Limited Lia		ny ay it now appear Jability Company)	SON OUT PECOTOS.) SECRETARY OF STATE TALLARASSEE, EL
The Articles of Organization for this Limited Lie	bility Company	were filed on 11	and assigned
Florida document number 1.21000489541	·		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company h	<u>ere</u> :
NA			the state of the s
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the c	designation "LLC" of the above ration (1919).
Enter new principal offices address, if applica	ıble:	NA	
(Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:		NA	
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		
		·	
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office ss here:	address on our	records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	LEONARDO	MOLINA	
 -	. 18117 BISCA	YNE BLVD 3112	
New Registered Office Address:		Enter Fl	orida street address
AVENT			Florida 33160
		City	Zip Code
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as regionary filed to merely reflect a change in the company has been notified in writing of this	er and complet istered agent as registered offic	e performance o provided for in	of my duties, that i am familia with that Chapter 605, F.S. Or, if this document is

Leonardo Molina 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
MGR	SHAWILDA VELASQUEZ	19370 COLLINS AVE, 1014	
		SUNNY ISLES BEACH, FL 33160	=Remove
			□Change
MGR	LEONARDO MOLINA	19370 COLLINS AVE 1014	≣ Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			☐ Change
AMBR JIMMY EL ASMAR	19370 COLLINS AVE 1014	□ Add	
		SUNNY ISLES BEACH, FL 33160	■Remove
			□ Change
AMBR	VANESSA MANRIQUE	19370 COLLINS AVE 1014	□Add
		SUNNY ISLES BEACH, FL 33160	■Remove
			□Change
NA	NA	NA	□Add
			
NA NA	NA	□Add	
		-	□Remove
			□ Change

Figure 1. Standard St	NA				·
ffective date, if other than the date of filing: NA (optional) 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 i Pursuant to 605 0207 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occurrent's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. FEBRUARY 2FTH					
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Filing Fee: \$25.00