121000508715

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Received 1-25-2022, Stating no errors Found, Please Proceed
errors Found, Please Proceed

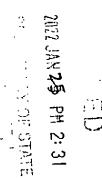
Office Use Only

A. RIVERS
JAN 2 7 2022



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RECEIVED

2022 JAN 25 PM 1:44 FLORIDA DEPARTMENT OF STATE

SECRETARY OF STATE Division of Corporations TALLAHASSEE, FL

January 8, 2022

PILY TEJEDA 6113 SW 191ST AVE. PEMBROKE PINES, FL 33332

SUBJECT: TEJEDA MPKM HOLDINGS, LLC *** SEE NOTE ***

Ref. Number: L21000508715

We have received your document for TEJEDA MPKM HOLDINGS, LLC *** SEE NOTE *** and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 822A00000580

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Tallahassee, FL 32314

	Registration Sec Division of Corp				
cub ica	CT (II)	PKM HOLDINGS, LLC			
SUBJEC	-I: <u></u>	Name of Limit	ed Liability Company		
The encl	losed Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please re	eturn all correspo	ndence concerning this matter to	o the following:		
		Pily Tejeda			
			Name of Person		
		TEJEDA MPKM HOLDIN	GS. LLC		
			Firm/Company		
		6113 SW 191st Ave			
			Address		
		Pembroke Pines, FL 33332			
			City/State and Zip Code		
		pilytejedam@hotmail.com		- 17	
			o be used for future annual re	ероп поинсанов	,
For furt	her information c	oncerning this matter, please ca	11:		
Pily Tej	jeda		954 668 at ()	- 6624	
	Name o	of Person	Area Code	Daytime Telep	hone Number
Enclose	ed is a check for t	he following amount:			
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy tadditional copy is enclosed.		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre		Street Ad		
	Registration Division of 0			ition Section n of Corporat	ions
	P.O. Box 632			itre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

v as it now appears on our records.) ability Company)	
vere filed on 12/01/21	and assigned
ity company here:	
y Company," the designation "LLC" or	the abbreviation "L.L.C."
ddress on our records, <u>enter the</u>	name of the new registere
	2022
Enter Elevida street address	25 X
City Florid	Zip Code
	2: 3 ₁
	ity company here: y Company," the designation "LLC" or ddress on our records, enter the Enter Florida street address , Floric

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 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>	Name	Address	Type of Action
MGR	Pily Tejeda	6113 SW 191st Ave	= Add
		Pembroke Pines, FL 33332	□Remove
			□Change
AMBR	Mily O. Tejeda Matos	6113 SW 191st Ave	■Add
		Pembroke Pines, FL 33332	□Remove
			□Change
AMBR	Kathy O. Tejeda Matos	6113 SW 191st Ave	
		Pembroke Pines, FL 33332	□Remove
			□Change
			□ Add
			□Remove
			Change
			Петоve
			Change
			□Add
			□Remove
			□Change

ffective date, if other than the date of filing: 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 lotte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records. record 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 dis filled Jated 12/13/2021 Amanda Signature of a member or authorized representative of a member		
ffective date, if other than the date of filing: [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.) Pursuant to 605.0207 force: 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. The 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 dis filed. [12/13/2021]		
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	l is f	
Signature of a member or authorized representative of a member		17/13/2071
Signature of a member or authorized representative of a member		1

Filing Fee: \$25.00