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## **COVER LETTER**

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Horta & Sanchez Involment Group LLC

(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on or liability Company)	ur records.)
The Articles of Organization for this Limited Liab Florida document number <u>L. 2100052.20</u>	_	were filed on 12/10	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liab	ility company here:	
The new name must be distinguishable and contain the word	ds "Limited Liabil	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab (Principal office address MUST BE A STREET)		6910N Wate TamparPL	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	6910 W W. Tampa, FL	aters Ave Apt 400 33634
B. If amending the registered agent and/or regagent and/or the new registered office address	istered office a here:	address on our record	s, enter the name of the new registered
Name of New Registered Agent:	Javier	Horta	
New Registered Office Address:	6910 W	Waters A	ve Apt 400
	Tam	P <b>Q</b> City	, Florida <u>33634</u> 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.

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
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		<del></del>	□Add
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			Change
		<del> </del>	□Add
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			□Remove
			□Change

ameno	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
<u>lote:</u> If	date, if other than the date of filing:
ocumen	t's effective date on the Department of State's records.
record s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	
	Signature of a member or authorized representative of a member
	•
	Javier Horta Typed or printed name of signee

Filing Fee: \$25.00