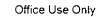
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(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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	1	COVER LETTER	1
	on Section f Corporations		•
	TRADE LLC		
UBJECT:	r Na	me of Limited Liability Company	
he enclosed Artic	es of Amendment and fee(s) are submitted for filing.	
lease return all co	rrespondence concerning th	is matter to the following:	
	OSCAR GUILLI		
		Name of Person	
	· · · · · · · · · · · · · · · · · · ·		
		Firm/Company	
	8958 W STATE	Firm/Company ROAD 84. STE 267	
	8958 W STATE		
	8958 W STATE DAVIE, FLORII	ROAD 84. STE 267 Address	
		ROAD 84. STE 267 Address	
	DAVIE. FLORII - KINDEM87@GM	Address OA 33324 City/State and Zip Code IAIL.COM	
	DAVIE. FLORII - KINDEM87@GM	Address OA 33324 City/State and Zip Code	port notification)
or further informa	DAVIE. FLORII - KINDEM87@GM	Address OA 33324 City/State and Zip Code IAIL.COM address: (to be used for future annual re-	port notification)
or further informa	DAVIE. FLORII KINDEM87@GM E-mail	Address OA 33324 City/State and Zip Code IAIL.COM address: (to be used for future annual re-	port notification)

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 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

(Name of the Lin	ited Liability Compa (A Florida Limited	any as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Florida document number L22000024652	Liability Company	were filed on $\frac{01/11/2}{}$	and assigned	
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	ation "LLC" or the abbreviation "L.L.C."	
Inter new principal offices address, if appl	icable:	8958 W STATE RO	AD 84, STE 267	
Principal office address MUST BE A STRE		DAVIE, FLORIDA	33324	
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		8958 W STATE RO	AD 84, STE 267	
		DAVIE, FLORIDA	33324	
3. If amending the registered agent and/or gent and/or the new registered office addr			ds, enter the name of the new regis	
Name of New Registered Agent:				
New Registered Office Address:	8958 W STAT	E ROAD 84, STE 267		
		Enter Florida s.		
	DAVIE		, Florida 33324	
		Сиу	Zıp Code	

New Registered Agent's Signature, if changing Registered Agent:

ACSTRADE LLC

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
MGR	SANTIAGO MENDEZ	8894 NW 44TH ST BLDG 5 #212	
		FORT LAUDERDALE, FL 33351	■Remove
			□Change
MGR	OSCAR GUILLEN	8958 W STATE ROAD 84. STE 267	= Add
	•	DAVIE, FL 33324	□Remove
			□Change
			□Add
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ffecti	ive date, i	if other than	n the date of	filina:	/2024	-, ·	(optio	nal)	
an eff ote:	ective date i If the date	is listed, the dat inserted in th	e must be specif his block does	fic and cannot not meet the	be prior to date o applicable sta	f filing or more th utory filing rea	an 90 days after uirements, this	filing.) Pursuant to date will not be	605.0207 listed as
			the Departmen						
		a delayed eff	fective date, bi	ut not an effe	ctive time, at 1	2:01 a.m. on th	e earlier of: (b)	The 90th day	after the
I is fil	led.								
	5/29/2024	•							
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Typed or printed name of signee