Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000128445 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (858)617-6383

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP

Account Number : I20200000059 Phone : (954)727-9771 Fax Number : (954)727-9773

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

Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LATIBULE LLC

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05
\$30.00

## **COVER LETTER**

TO: Registration Se Division of Cor		, •	A
LATIBULI Subject:	ELLC		
	Name of Lim	ited Lizbility Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ALEJANDRA SUAREZ		
		Name of Person	
	LATIBULE LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	1500 NE MIAMI PL APT	2711	
		Address	
	MIAMI, FL 33132		
		City/State and Zip Code	
	ALEJANDRATARABILLO	•	
	E-mail address: (	to be used for future annual report t	notification)
For further information c	oncerning this matter, please ca	all:	
alejandra suarez		786 <b>86</b> 5-5654	
Name o	f Person		time Telephone Number
Enclosed is a check for the	ne foilowing amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
Mailing Address		Street Address	
Registration S Division of C		Registration Division of O	
P.O. Box 632			f Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

No. 4124 P. 3

Acr. 8. 2022 12:10FM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LATIBULE LLC		
(Name of the Limite	ed Liability Company as it now appears on our record (A Florida Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Li	ability Company were filed on 01/18/2022	and assigned
his amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE L	<u> </u>	
B. If amending the registered agent and/or reagent and/or the new registered office addres		the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres.	
	, Fle	orida

## 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 am A; 1. 2. 2022 it 12: 10 PM n(s) authorized to manage, enter the title, name, and address No. 4124 ersch. Leing added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	ALEJANDRA SUAREZ	1500 NE MAIMI PL APT 2711	
		MIAMI, FL 33132	□ Remove
			bbA□
			□Remove
			□ Change
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			04/08/2	022			
effective	date is listed, the	an the date of	filing: ific and cannot be p	orior to date of fil	ing or more than 90	(optional) days after filing.) Pu	115u2nt to 605.020
			s not meet the ap nt of State's reco		ry filing requires	nents, this date wi	I not be listed a
ecord specis	cifies a delayed	effective date, b	ut not an effecti	ve time, at 12:0	l a.m. on the ear	lier of: (b) The 9	0th day after the
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04/08 ted	3/2022		_AA		`		
					7		
		بر کایا	X181211	2- Ve.11	•	per	

Typed or printed name of signed