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COVER LETTER

TO: Registration So Division of Con				
SUBJECT:	LARREF	+ LARREA HO	MES LLC	
SUBJECT:	Name of Lin	nited Liability Company		
The analogue Assistance	· A	and the state of t		
	Amendment and fee(s) are sub	<u>-</u>		
Please return all correspo	ondence concerning this matter	to the following:		
	MARICARMEN APONT	E		
		Name of Person	,	
	MACCPALAW LLC			
		Firm/Company		
	11848 DUNE ALLEY			
		Address		
	ORLANDO, FL 32832			
		City/State and Zip Code		
	macepalaw@gmail.com			
		to be used for future annual report no	tification)	
For further information c	oncerning this matter, please c	alt:		
MARICARMEN APON	TE	787 4337373		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	he 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:		Street Address:		
Registration Section Division of Corporations		-	Registration Section Division of Corporations	
P.O. Box 6327		The Centre of	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LARRREA & LARREA HOMES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JANUARY 21,2022 and assigned Florida document number L22000041118 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 11848 DUNE ALLEY Enter new mailing address, if applicable: ORLANDO,FL 32832 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new re agent and/or the new registered office address here: MAC CPA&LAW LLC Name of New Registered Agent: 11848 DUNE ALLEY New Registered Office Address: Enter Florida street address Orlando

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 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	PAULA A. LARREA	8720 56TH AVE	≅ Add
		ELMHURST, NY 11373-4803	□Remove
			□Change
		□ Add	
			□Remove
			□Change
			□Remove
			Change
			□Add
		□Remove	
			□Add
			□Remove
<u>. </u>			
			□ Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an cf <u>Note:</u>	ive date, if other than the date of filing:
If the recorrecord is fi	d 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 led.
Dated	APRIL 21
	Official armediate of a member of authorized representative of a member
	MARICARMEN APONTE, CPA

Typed or printed name of signee