## L220000 47270

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22 APR 29 PM 3: 02

T. MATTHEWS

## **COVER LETTER**

	legistration Se Division of Cor			
viin ir ca	WINIKA L	LC.		
SUBJECT	ı: <u></u>	Name of Lim	ited Liability Company	<del>.</del>
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırıı all correspo	ondence concerning this matter	to the following:	
		GONZALO ALBERTO FI	ERREIRA	
			Name of Person	
		WINIKA LLC.		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1766 SE 27th ROAD		
			Address	
		HOMESTEAD, FLORIDA	A, 33035	
			City/State and Zip Code	
		WINIKA.VINEGAR@GM	AIL.COM to be used for future annual report not	·
For furthe	r information c	oncerning this matter, please c	•	meanon
GONZAL	O ALBERTO	FERREIRA	786 795-3140	
	Name o	f Person	at ()	ne Telephone Number
Enclosed i	is a check for t	he following amount:		
<b>■</b> \$25.00	0 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)
	Aailing Addres	<del></del>	Street Address:	
Registration Section Division of Corporations		Registration Se Division of Co		
	P.O. Box 632		The Centre of 7	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION SECRETARY OF STATE DIVISION OF CORPORATIONS **OF**

WINIKA LLC.

22 APR 29 PM 3: 02

	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited I Florida document number L22000047270		26/2022 and assigned
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:		
isince new maning address; it appreasies		
	<u> </u>	
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or	registered office address on our re	ecords, enter the name of the new regi
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or	registered office address on our re	ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or	registered office address on our re	
Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our reess here:	
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address  Name of New Registered Agent:	registered office address on our reess here:  GONZALO ALBERTO FERREIF  1766 SE 27th ROAD	

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

ii 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

Title	<u>Name</u>	Address	Type of Action
MGR	ANALIA VILLALBA	5555 COLLINS AVE. APT 4B, MIAMI BEACH	🗆 Add
		FLORIDA, 33140	<b>=</b> Remove
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
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	<del></del>		□Add
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			□Remove

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