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A. BUTLER APR 2 2 2022

COVER LETTER

	egistration Sc ivision of Cor			
SUBJECT		FREELANCE LLC	·	
SOBJECT	:	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspe	ondence concerning this matter	to the following:	
		NATYBETH BLANCO		
			Name of Person	
		SANCHEZ FREELANCE	LLC	
			Firm/Company	100-0-0
		18117 BISCAYNE BLVD	3112	
			Address	
		AVENTURA, FL 33160		
			City/State and Zip Code	
		USTUEMPRESA@GMAII	COM to be used for future annual report not	·,-
For further	information c	oncerning this matter, please ca		meation)
	H BLANCO		786 340-0372	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed.	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Ro Di		Section orporations	Street Address: Registration So Division of Co	rporations
	O. Box 632 Illahassee, I		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 APR -5 AM 10:- 1 6 SANCHEZ FREELANCE LLC (Name of the Limited Liability Company as it now appears on our records.) SECRETARY OF STATE TALLAHASSEE and assigned (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/29/2022 Florida document number <u>1.22000051363</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NA The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) NA Enter new mailing address, if applicable: (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 registered agent and/or the new registered office address here: Name of New Registered Agent: NANew Registered Office Address: Enter Florida street address NA

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:

i

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	FREDERIC SANCHEZ	18117 BISCAYNE BLVD, 3112	≣ Add
		AVENTURA, FL 33160	□Remove
NA	NA 	NA	□Add
			□Remove
			Change
NA	NA	NA	□Add
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