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(Requ	estor's Name)	
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(City/S	State/Zip/Phone	e #)
(On), C	3.0.13.12.p./	<i>,</i>
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nar	ne)
(Docu	ment Number)	
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Certified Copies	Certificates	e of Statue
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Special Instructions to Fil	ing Officer:	
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J. H	ORNE	
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2022 MAR IO AH 9: 54 SECRETARY OF LIGHT

COVER LETTER

TO: Registration Se Division of Cor	ction porations	•	
	CKSON MIC"		. •
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ivan Tobon		
		Name of Person	
	Aliva Jackson LLC		
		Firm/Company	
	5120 Curry Ford Road		
		Address	
	Orlando, FL 32812		
		City/State and Zip Code	
	ivan@outletrealty.com	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co		,
Ivan Tobon		407 353-5518	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.
2	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration 1 Division of C		Registration Sec Division of Cor	
PIARIOUGE	ocaporations.	DIVISION OF COL	Lating

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAR 10 AM 9: 54

Aliva Jackson LLC

SECRETARY OF STATE

(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 $\frac{02/03/202}{}$	2 and assigned
Florida document number 1.22000059245		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ity Company." the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	*	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	, enter the name of the new registered
Name of New Registered Agent:		-1
New Registered Office Address:		
1.6.5.14.5.1.5.1.5.1.5.1.5.1.5.1.5.1.5.1.5.	Enter Florida stree	a address
	<u> </u>	Florida Zip Code
	•	Zip Code
New Registered Agent's Signature, if changing Registered Agents		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my du provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is
	nging Registered Agent, Sig	nature 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	Yaneth Monsalve	5120 Curry Ford Road	
		Orlando, FL 32812	□Remove
			□Change
			DAdd
			□Remove
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Effective date, if other tha (If an effective date is listed, the da Note: If the date inserted in t document's effective date on	his block does no	ot meet the applic	able statutory filing	(optiona ore than 90 days after filir g requirements, this da	l) g.) Pursuant to 605.0207 te will not be listed as
ne record specifies a delayed el ord is filed.	fective date, but	not an effective t	ime, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
Dated March 4		2022	 ·		
		Der)		
				(4)	
	Signature o	i amember or with	erized representative	of a member	

Filing Fee: \$25.00