

L2200011754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

(Business Entity Name)

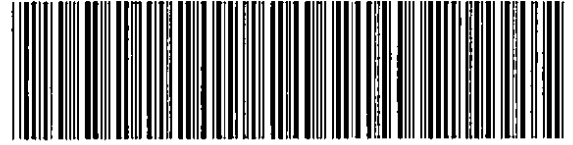
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TALLAHASSEE, FL

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Y. SCOTT

JUL 22 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cortinas Services LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Orestes Cortina Sosa

Name of Person

Cortinas Services LLC

Firm/Company

5959 Basil Dr.

Address

West Palm Beach, FL

City/State and Zip Code

orestescortinas@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Orestes Cortina Sosa

561

785-4279

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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2023 MAY 30 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Cortinas Services 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 03/02/2022 and assigned
Florida document number L22000111754.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5959 Basil Dr.

West Palm Beach, FL 33415

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5959 Basil Dr.

West Palm Beach, FL 33415

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:

Orestes Cortina Sosa

New Registered Office Address:

5959 Basil Dr.

Enter Florida street address

West Palm Beach

Florida

33415

City

Zip Code

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rolando Cortinas	5959 Basil Dr.	☐ Add
		West Palm Beach, FL 33415	☒ Remove
		5959 Basil Dr.	☐ Change
MGR	Orestes Cortina Sosa	West Palm Beach, FL 33415	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Remove
			☐ Change

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TALLAHASSEE, FL

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OFFICE OF STATE
ATTORNEY GENERAL
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 26 2023

Signature of a member or authorized representative of a member

Orestes Cortina Sosa

Filing Fee: \$25.00