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Division of Corporations



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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : WHOLE TAX PROFESSIONAL SERVICES, INC.

Account Number : I20200000179 : (785)253-9951 Phone : (305)397-1052 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LILIANA SANCHEZ REALTOR, LLC

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2022-04-21 16:01:53 GMT

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To: +18506176383

## ARTICLES OF AMENDMENT " ARTICLES OF ORGANIZATION

LILIANA SANCHEZ REALTOR, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	ny as It now appears on our records.) nability Company!		
The Articles of Organization for this Limited Liability Company	were filed on 04/01 2022	and assigned	
Florida document number L22009158750		,	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
LILIANA I SANCHEZ, LLC			
The new name must be distinguishable and contain the words "Limited Liabil	nty Company," the designation "LLC" (	or the abbreviation "IEEC."	
Enter new principal offices address, if applicable:		122 A	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	و قالة فيك الله المستقد ومواجعة والواجعة والمستقد والمست	9	
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B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	luaress on our records, emer a	ie name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City Zip Code		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree	ee to act in this capacity. I furt	her agree to comply with the	

provisions of all statutes relative to the proper and complete performance of my duties, and I um 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 charge.

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

<u>Title</u>	Name	Address	Type of Actio
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<b>Rective date, if other than the</b> an effective date is listed, the date must ote: If the date inserted in this bloomment's effective date on the December 1.	the specific and cannot be pock does not meet the ap	plicable statutory	or more than 90 days	optional) after filing.) Pursuant to , this date will not be	605,020 listed a
record specifies a delayed effective listified.	e date, but not an effectiv	ve (ime, at 12:0) (	am on the earlies (	of: (5) - The 90th day	after th
APRIL 20	2022				
	ana Sanchez	·			
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