L22000170499

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	ne)
(Docu	iment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ling Officer:	
		. <u>-</u>

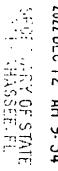
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COVER LETTER

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TO:

TO: Registration Se Division of Cor			y.
SUBJECT:	LELABI, LLC		·
	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Carolina	ı Portocarrero	
		Name of Person	
		Firm/Company	
	10500 S	W 62 Ave	
		Address	
	Pinecres	st, FL 33156	
	· f al	City/State and Zip Code	
		13pllc.com to be used for future annual re	white antificultion
For further information c	oncerning this matter, please c		port notification)
Luis R Lasa I	II, Esq	at (305)	263-3670
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	ne following amount:		
∑ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status &
Mailing Addres Registration S		<u>Street Adc</u> Registrat	Iress: ion Section
Division of C	orporations	Division	of Corporations
P.O. Box 632 Tallahassee, l			tre of Tallahassee Monroe Street, Suite 810
rananassee, i	L D D Z D 1 T	2410 IN.	monioc succi, suite arv

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LELABI, LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records. Liability Company)	,)
The Articles of Organization for this Limited Liability Company Florida document number 1.22000170499	were filed on 4/8/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC"	or the abbreviation L.L.C."
Enter new principal offices address, if applicable:		A A TI
(Principal office address MUST BE A STREET ADDRESS)		
	·	Y OF ST Y OF
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	47-	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name The First Restatement of the	Address	Type of Action
MGR	Margarita S. Vazquez Bello Revocable Trust	10500 SW 62 Ave., Pinecrest, FL 33156	∑ Add
			□Remove
			🗀 Change
MGR	MGR Carolina Portocarrero	10500 SW 62 Ave., Pinecrest, FL 33156	□Add
			EX Remove
			□Change
MGR	R Margarita Leon	10500 SW 62 Ave., Pinecrest, FL 33156	□Add
			⊠ Remove
			□ Change
MGR	MGR Luis F Vazquez Bello	10500 SW 62 Ave., Pinecrest, FL 33156	□ Add
			⊠Remove
			□Change
MGR	MGR Patricia Vazquez Bello	10500 SW 62 Ave., Pinecrest, FI. 33156	□Add
			X Remove
			🗆 Change
			□ Add
			□Remove
			□Change

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n effectiv ote: If tl	date, if other than the date of filing:
cord sp is filed.	occifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	12/7/2022
	Signature of a member or authorized representative of a member
	Luis R Lasa III, Esq.
	Typed or printed name of signee

Filing Fee: \$25.00