## h22000179065

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600393213306

12 A 24 A

5. 24. L. -611. -- 014 \*\*25.65

SECRETARY OF STATE TALLAHASSEE, FL

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:R	CATVA, LLC Name of Lim	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:	
	<u>Bianca</u> E	Name of Person	
	Ricara L	L.C. Firm/Company	
	311de 82.00	Ave cire Ap	+ 10 1
	Scrasora, FL	S4Z43 City/State and Zip Code	
	rvo, bienca ? E-mail address: (i	67 @ Gmcul . Com	otification)
For further information co	oncerning this matter, please ca	all:	
Bianca Rico Name o	f Person	at ( <u>Q41</u> ) <u>A47</u> Area Code Dayt	- 4248 ime Telephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

None of the Limite	111-110-C	
(isame of the Limite	d Liability Company as it now appears on our rec A Florida Limited Liability Company)	oras.)
The Articles of Organization for this Limited Lia		4, 202 Z and assigned
Florida document number 12000179	065	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	(ADDRESS)	122 AUG SEORET
Enter new mailing address, if applicable:		L T 24 P
(Mailing address MAY BE A POST OFFICE E	<u> </u>	STATE E, FL
B. If amending the registered agent and/or reagent and/or the new registered office address		ter the name of the new registered
Name of New Registered Agent:	4	
New Registered Office Address:	Enter Florida street ade	lress
		Florida
	City	Zıp 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>	Address	Type of Action
MGR	Biarra Rico	4001 Benevaled unit 332	<b>S</b> Add
		Sarasola, FL 34233	□Remove
			Change
MGR	Secgio Carva'yal	4001 Benevalled units	<u>?</u> ■Add
		saraso 18, FL 34233	□Remove
			□Change
			🗆 Add
		<del></del>	□Remove
			□Change
		<del> </del>	
			□Remove
			□Change
	<del></del>		□Adđ
			□Remove
		<del></del>	🗆 Change
			🗀 Add
			□Remove
			□Change

manager  the LLC	10 hr	<u>able</u>	<u>to a</u>	200 (	i bi	ant Occ	can+ fo	
	•							
	<del></del>							
		- '						
	<del> </del>							
	· · · · · · · · · · · · · · · · · · ·							
								<del></del>
Mective date, if other is an effective date is listed, the ote: If the date inserted ocument's effective date	ne date must be spe Lin this block do	es not mee	union be prior t et the applica	o date or min	និលាយ១៤។	han 90 days aftequirements, th	<b>ional)</b> er filing.) Pursuan iis date will not	1 to 605 0207 be listed as
ecord specifies a delaye is filed.								ay after the
nted <u>Avg 21, 2</u>	2022	<del></del>	2022	_ ·				
	Beancer Signat	Lice ure of a me	) mber or autho	rized represe	ntative of a	meniber		
_	sianca E							