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22 MAY 16 AM 8: 39

T. MATTHEWS

JUL 15 2022

COVER LETTER

TO:

TO: Registration So Division of Cor				
COPALIN	K LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing,		
Please return all correspo	ondence concerning this matter	to the following:		
	SERGIO PALACIOS			
		Name of Person		
		Firm/Company		
	14955 SW 36th ST			
		Address	, p	
	DAVIE, FLORIDA, 3333	1		
		City/State and Zip Code		
	COPALINKLLC@gmail.co			
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notifically	fication)	
	oncerning this matter, prease e			
Sergio Palacios		305 4587166 at ()		
Name o	f Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for t	he 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) 	
<u>Mailing Addres</u> Registration 3		<u>Street Address:</u> Registration Sec	ction	
Division of Corporations		-	Division of Corporations	
P.O. Box 632		The Centre of T		
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO TARY OF STATE ARTICLES OF ORGANIZATIONS OF 22 HAY 16 AM 8: 39

COPALINK LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L22000183778	were filed on APRIL 18, 2022	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	nding name, enter the new name of the limited liability company here: me must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." principal offices address, if applicable: office address MUST BE A STREET ADDRESS) mailing address, if applicable: address MAY BE A POST OFFICE BOX) I 4955 SW 36th ST Davie, FL. US 33331 Davie, FL. US 33331		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	14955 SW 36th ST		
(Principal office address MUST BE A STREET ADDRESS)	Davie, FL. US 33331		
Enter new mailing address, if applicable:	14955 SW 36th ST		
(Mailing address MAY BE A POST OFFICE BOX)	Davie, FL. US 33331		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>enter</u>	the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flo	o rida Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		z.y Cixie	
I hereby accept the appointment as registered agent and agrouped provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as public being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605. I	nd I am familiar with and F.S. Or, if this document is	

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	Barbra X Palacios	14955 SW 36th ST	□ Add
		Davie, FL. US 33331	■Remove
			C) Change
MGR	Barbra Palacios	14955 SW 36th ST	Add
		Davie, FL. US 33331	□Remove
			□Add
			□Remove
			□ Change
			□Add
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ffective date, if other than the can effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the De	be specific and canno ck does not meet th	e applicable statu	filing or more than 9 tory filing require	(optional)) days after filing.) Purs ments, this date will t	uant to 605.0207 (not be listed as t
record specifies a delayed effective lis filed.	date, but not an eff	ective time, at 12	:01 a.m. on the ear	tier of: (b) The 90th	n day after the
ated May II					
		1.11	_		
	Signature of a membe	/-			

Filing Fee: \$25.0