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To	:
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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

\*\*Enter the email address for this business entity to be used for fuffure ဆ်

annual report mailings. Enter only one email address please. \*\* EFILE1234@INCFILE.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## SANTIAGO PALLETS LLC

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TO:

Registration Section

## **COVER LETTER**

Division of Cor	rporations					
eun in en		GO PALLETS LLC				
SUBJECT:	Name of Lin	nited Liability Company				
Please return all correspo	ondence concerning this matter	to the following:				
	LOVETTE DOBSON					
		Name of Person				
		Firm/Company	<u></u>			
	17350 STATE HWY 249	STE 220				
	SANTIAGO PALLETS LLC  Name of Limited Liability Company  es of Amendment and feets) are submitted for tiling.  respondence concerning this matter to the following:  LOVETTE DOBSON    Name of Person					
	HOUSTON, TX 77064					
		M				
	F-mail address: (	to be used for future annual report not	(ification)			
For further information c	oncerning this matter, please c	all:				
LOVETTE DOBSON		1 888-462-34 nt ()	53			
Name o	of Person	Area Code Daytii	ne Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy			
<u>Mailing Addres</u> Registration (			ection			
Division of C	orporations	*				
P.O. Box 632		The Centre of				
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PALLEIS LLC		
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears	on our records.)	<del></del>
(A Fiorita Limit	ed Liability Company)		
The Articles of Organization for this Limited Liability Compa	my were filed on	04/21/2022	and assigned
Florida document number 1,22000191094	-		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the des	ignation "LLC" or the a	obbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>		
(Principal office address MUST BE A STREET ADDRESS)	<del></del>		
		<del></del>	
			2022 Sec
Enter new mailing address, if applicable:	<del></del>		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)			
			世紀   <b>- - - - - - - - - -</b>
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
B. If amending the registered agent and/or registered office	ee address on our rec	ords, enter the nat	, , , , , , , , , , , , , , , , , , ,
agent and/or the new registered office address here:	te mairess on our rec	trus, enter the int	ned
		ľ	
			<i>(</i> )
Name of New Registered Agent:	<u></u> .		
New Registered Office Address:			
New Registered Village Fidules.	Enter Florid	a street address	
		Florida	
<del></del>	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleacept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	igree to act in this ca ete performance of m us provided for in Ch	iy duties, and I am apter 605, F.S. Or	funiliar with and r, 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
AMBR	Brayan Bouchant Quirino	4302 Reynolds Creek Ave	<b>≡</b> Add
		Plant City, FL 33563	□Remove
			_
			□Remove
			□Add
			□Remove
			☐ ☐ Change
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Secretary Lag 16 male and all all		•					D	
ffective date, if other than the of an effective date is listed, the date most sote: If the date inserted in this bloodocument's effective date on the Department.	be specific a ck does no	and cannot be it meet the a	e prior to da applicable	te of filing er	more than 90	ldays after fi	ling.) Pursuar	
record specifies a delayed effective d is filed.	date, but n	not an effect	tive time. :	at 42.01 a.n	i, on the ear	lier of: (b)	The 90th d	ay after the
September 1st		2022	,					
<u> </u>	C i	.7						
Santiage C	) celifece ignaphre of	a member or	authorized	representati	ve of a memb	ei		