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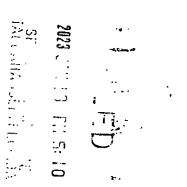
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COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Moniero	Enameial Chroup Lic - 7 Fu	HERALS FOR 75 LLC		
		nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter			
	Roque Montero			
		Name of Person		
	Montero Financial Group	the 7 Funerals For 7.5 LL	С	
		Firm/Company		
	2938 Madison St #2			
		Address		~
	Hollywood FL 33020		;- 141 [- 2 5
	roquemontero@gmail.com	City/State and Zip Code		:
	E-mail address: ()	to be used for future annual report notifica-	****	
For further information of	concerning this matter, please co	ıll:	<u>. </u>	က္က <u>ပ</u> ်
Roque montero		305 610-6709 at ()		0
Name (r Person		elephone Number	_
Enclosed is a check for t	he 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 Certificate of Certified Cop tadditional copy	Status &
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corpo The Centre of Tall 2415 N. Monroe S Tallahassee, FL 32	rations lahassee Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-Montero-Pinancial Group Isle 7 FUNERALS F	FOR 75 LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	uny as it now appears on our records.) Liability Company)	-	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000196170}{}$. This amendment is submitted to amend the following:	, ,	and assigned	
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	6400 SW 20TH CT # S MIRAMAR, FL 33023		
(Principal office address MUST BE A STREET ADDRESS)	MIRAMAR, FL 330	23	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6400 SW 2074 C MIRAMAR, FL 33	T # S 023	
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 the</u> n	ame of the new registere	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address	2023 2023	
	, Florida	2 Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	•	En.	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	verformance of my duties, and Lai rovided for in Chapter 605, F.S. (n familiái with an d Taisthis document is	

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
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Remove □ Change
			□Remove
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			□Add
			□Remove

Discharge email: sunralle@yahoo.com			·
			
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tive date, if other than the date of filing: 01/01/2023 filective date is listed, the date must be specific and cannot be prior to date of filing. If the date inspect of in this block date and cannot be prior to date of filing.	, (option	ıal)	
in the date inserted in this block does not meet the applicable statutor	ng or more than 90 days after fi ry filing requirements, this c	ling.) Purs late will	uant to 605.0 not be listed
nent's effective date on the Department of State's records.			
ord specifies a delayed effective date, but not an effective time, at 12:01	a m. on the earlier of the	Th., 00•	h day a6 sm
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1 <u>01/01/·</u>			

Typed or printed name of signee