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COVER LETTER

TO:	Registration Sec Division of Corp					
eun u	·cr.	FEB	ECA LLC	, ,		
SOBJE	ECT:	Name of Limi	ted Liability Company	<u></u>		
The en	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspor	idence concerning this matter t	to the following:			
		Jessica Serell Erenbaum, E	sq.			
			Name of Person			
		Genovese, Joblove & Batti	sta, P.A.			
		-	Firm/Company			
		100 S.E. Second Street, 44	th Floor			
	Address					
		Miami, Florida 33131				
		 _	City/State and Zip Code			
		jerenbaum@gjb-law.com				
		E-mail address: (t	o be used for future annual report noti	fication)		
For fur	ther information co	ncerning this matter, please ca	ill:			
Jessica Serell Erenbaum, Esq.		305 349-2315				
	Name of	Person	at () Area Code Daytim	e Telephone Number		
Enclose	ed is a check for th	e following amount:				
■ \$2	5.00 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)		

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

FILED

2022 JUL 25 AM 11: 46

SECRETARY OF STATE FEBECA LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) May 13, 2022 The Articles of Organization for this Limited Liability Company were filed on and assigned L22000197045 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

_, Florida _

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	Ramon E. Barazarte Valladares	3580 NW 85th Ct., Apt. 253	≣ Add
		Doral, FL 33122	□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
			Remove
			□Change
			□ Remove
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	July 15, 2022
effe	ve date, if other than the date of filing:
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s file	
ed _	July 22 . 2022. Signature of a member or authorized representative of a member
	Compage &
	Signature of a member or authorized representative of a member
	Jessica Erenbaum

Filing Fee: \$25.00