## L22000198622

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## **COVER LETTER**

Division of				
SUBJECT:	Name of Li	mited Liability Company		
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.		
Please return all cor	respondence concerning this matte	r to the following:		
	Isaac Alfaro			
	· <del>-</del>	Name of Person	<u> </u>	
		Firm/Company		
	2415 NW 16TH ST RD /			
		Address		
	ALFARO LLC    Name of Limited Liability Company			
Division of Corporations  WI ALFARO LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Isaac Alfaro				
D 6 4 . 6			etification)	
	ion concerning this matter, please			
	at ()		332	
Nε	ame of Person	Area Code Dayti	me Telephone Number	
Enclosed is a cheek	for the following amount:			
■ \$25.00 Filing Fe		Certified Copy	Certificate of Status & Certified Copy	
			ection	
Division	of Corporations	Division of Co	Division of Corporations	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WI ALFARO LLC			
(Name of the (A Florida Limited	Liability Company)	<u></u>	
The Articles of Organization for this Limited Liability Company	were filed on 04/26/22	and assigned	
Florida document number L22000198622			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LI	.C" or the abbreviation "L.L.C."	
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. It amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street addr	A I ST	
	, l	Florida	
	•	·	

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	WILLIAM ISAAC ALFARO	2415 NW 16TH ST RD #612	
		MIAMI, FL 33125	Remove
			■ Change
			□Add
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Flective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing 1 Pursuant to 605.0 arts. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed common is effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after this filed.  Signature of a member of superfurence representative of a member.  William lower Alface.	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	ней <u>07/29/22</u>	
William Jones Attara	Signature of a member of partition of a member	
william isaac Amaro	William Isaac Alfaro	

Filing Fee: \$25.00