# Florida Department of State Davision of Corporation

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC

Account Number : I2014000083

Phone : (407)932-0040 Fax Number : (407)520-5473

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

C-421	Address.			
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MONOPC INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

### **COVER LETTER**

TO:	Registration Sec Division of Corp			
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SORTEG	, I;	Name of Limi	ted Liability Company	<del></del>
The encl	losed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please re	etum all correspor	ndence concerning this matter t	to the following:	
		DAVID POSADA QUEVE	BDO	
			Name of Person	
		MONOPC INVESTMENTS LLC  Name of Limited Liability Company  Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:    DAVID POSADA QUEVEDO		
			Firm/Company	
		1428 RIDGE STSTE 159		
			Address	
		KISSIMMEE, FL 34744		
			City/State and Zip Code	
		E well address (	to he used for hiture annual servest not	(Cation)
For furt	her information co			,
DAVID	POSADA QUEV	/EDO		
		Area Code Daytin	ne Telephone Number	
Enclose	d is a check for th	e following amount:		
■ \$25	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Division of C P.O. Box 632	Section forporations 7	Registration Se Division of Co The Centre of	rporations Tallahassee pe Street, Suite 810

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MONOPC INVESTMENTS LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compa	ny were filed on 05/03/2022 and assigned
Florida document number L22000209781	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited list	ability company here:
The new name must be distinguishable and contain the words "Limited Lis	bility Company," the designation "LLC" 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. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
	ADA OUTEVEDO
Name of New Registered Agent: DAVID POS	ADA QUEVEDO

#### New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

1428 RIDGE STSTE 159

KISSIMMEE

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	Name	Address	Type of Action
AMBR	DAVID POSADA QUEVEDO		
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			Remove
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Effective date, if other the if an effective date is listed, the Note: If the date inserted in document's effective date of	date must be specific and this block does not n	d cannot be prior to dineet the applicable	late of filing or more that e statutory filing requ	(optional) n 90 days after filing.) Purs irements, this date will	ruant to 605.0207 ( not be listed as t
e record specifies a delayed of is filed.	effective date, but not	an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90t	h day after the
Dated Hoy 23		2022			
Shut	Signatura of a c	namber or authoriza	ed representative of a m		<del></del>

Filing Fee: \$25.00