

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

# L2200024222

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H220002835093ABC\*

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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : WHOLE TAX PROFESSIONAL SERVICES, INC.  
Account Number : 120200000179  
Phone : (786)253-9951  
Fax Number : (305)397-1052

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

Email Address: wholetax@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ESMERALLY, LLC**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 AUG 22 AM 9:59

APPROVED  
AND  
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2022 AUG 22 PM 12:23

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Corporate Filing Menu

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AUG 23 2022  
K. Brumley

H22000283509

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ESMERALLY, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/26/2022 and assigned  
Florida document number L22000244222.

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 "L.L.C."

Enter new principal offices address, if applicable:

9890 SW 28TH ST

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33165

Enter new mailing address, if applicable:

9890 SW 28TH ST

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33165

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:

9890 SW 28TH ST

Enter Florida street address

MIAMI

Florida 33165

City

Zip Code

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.*

*Esmeralda Prieto Alonso*

If Changing Registered Agent, Signature of New Registered Agent

APPROVED  
AND  
FILED  
AUG 22 AM 9:59  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
DADE COUNTY, FLORIDA



