

L22000271067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

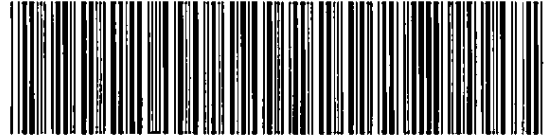
(Business Entity Name)

(Document Number)

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2022 AUG 17 PM 4:14
ATTORNEY GENERAL

RECEIVED
2022 AUG 17 PM 4:30
DEPT OF STATE
TALLAHASSEE, FL

A. BUTLER
AUG 17 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARIAS & BOTERO GROUP LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAIME H ARIAS ARIAS

Name of Person

ARIAS & BOTERO GROUP LLC

Firm/Company

6409 SHORELINE CT

Address

SAINT CLOUD, FL 34771

City/State and Zip Code

INFO@JCBSOLUTIONSINC.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAIME H ARIAS ARIAS at (866) 296-1833
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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**

ARIAS & BOTERO GROUP LLC

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

FILED
2022 AUG 17 PM 4:30

SECRET
TALLAHASSEE
STATE

The Articles of Organization for this Limited Liability Company were filed on 06/14/2022 and assigned Florida document number L22000271062.

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:

1780 WELHAM ST

(Principal office address MUST BE A STREET ADDRESS)

APT 231

ORLANDO, FL 32814

Enter new mailing address, if applicable:

1780 WELHAM ST

(Mailing address MAY BE A POST OFFICE BOX)

APT 231

ORLANDO, FL 32814

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

_____, Florida _____

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.

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ubber H. Botero-Aristizabal	1780 WELHAM ST APT 231	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32814	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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