122000360031

(Requ	estor's Name)
(Addro	ess)	
(Addre	ess)	
(City/s	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL.
(Business Entity Name)		
(Docu	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	

Office Use Only



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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	rision of Corp	porations		
aun mere	Onidis Lope	ez, LLC		*
SUBJECT:		Name of Limi	ted Liability Company	-
The enclosed	d Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return	all correspon	ndence concerning this matter t	to the following:	
		Onidis Lopez		
			Name of Person	
			Firm/Company	
		10287 SW Village Pkwy A	.pt 206	
			Address	
		Port Saint Lucie, FL 34987		<u> </u>
			City/State and Zip Code	
		onidis@icloud.com E-mail address: (1	to be used for future annual report notification)	
For further i	information co	oncerning this matter, please ca		
Onidis Lop			954 802-0981 at ()	
	Name of	f Person	Area Code Daytime Telephone N	umber 2022 0C
Enclosed is	a check for th	ne following amount:		
≣ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	ntificate of Status & Trificate Copy 1400 ditional copy is enclosed)
	ailing Addres		Street Address: Registration Section	
		Corporations	Division of Corporations	
	O. Box 632	-	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Onidis Lopez 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 8/16/22 Florida document number L22000360031	and assign	ed
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 ab	obreviation "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)		
maining address may be at rost of the Bong		
B. If amending the registered agent and/or registered office address on our records, enter the naπ	ie of the new re	gist
agent and/or the new registered office address here:	71.7.4.7. 13.6.7.4.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	7
Name of New Registered Agent:	#\$ - <	
New Registered Office Address:		
Enter Florida street address		
, Florida, Florida	Zip Code	
Now Design and Angella Clarature of changing Designand Agents	-	

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 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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Onidis Lopez	10287 SW Village Parkway, Apt 206	= Add
		Port Saint Lucie, FL 34987	□ Remove
AMBR	Onidis Lopez	10287 SW Village Parkway, Apt 206	= Add
		Port Saint Lucie, FL 34987	□ Remove
			□ Change
			□Add
			Remove
			Change
			□Remove
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□ Remove
			□Change
			□ Add
			□Remove
			□Change

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(If an effective date is listed, the date mu	block does not meet the applicable statut	(optional) lling or more than 90 days after filing.) Pursuant to 605.0207 ory filing requirements, this date will not be listed as
the record specifies a delayed effective ord is filed.	ve date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 90th day after the
Dated September 26	2022	
~		sentative of a member

Filing Fee: \$25.00

Typed or printed name of signee