Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000289779 3)))



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To:

Page: 2 of 8

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC. Account Number : I20190000044

: (407)888-3131

Fax Number

: (888)453-0509

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

رنې

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMERICAN IN ACTION ORLANDO LLC

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25.00

C. BRUMBLEY

AUG 2.9.2022

Electronic Filing Menu

Corporate Filing Menu

Help

From: Tax Zone

Registration Section

To:

TO:

COVER LETTER

2022-08-26 18:44:42 GMT

Division of	Corporations		
AMER	ICAN IN ACTION ORLANDO L	LC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	ED KOTLER		
		Name of Person	
	TAX ZONE INC		
		Finn/Company	
	8865 COMMUNITY CIR	STE 4	
		Address	
	ORLANDO, FL 32819		
	A	City/State and Zip Code	
	ACCOUNTANT@TAXZO	NEFL.COM to be used for future annual report notific	
For further information	on concerning this matter, please c		аши
	on concerning this matter, prease c		
ED KOTLER		407 888-3131 at () Area Code Daytime 7	
Nar	nc of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	or the following amount:		
S25.00 Filing Foo	© \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Add	dress:	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN IN ACTION ORLAND	OO ELC			
(Name of the Limite	d Liability Compa A Florida Limited	any as it now appears on ou Linbibly Company)	r records.)	·· ·····
The Articles of Organization for this Limited Lia	bility Company	were filed on 08/19/202	2 as	nd assigned
Florida document number L22000366106	·			
his amendment is submitted to amend the follow	wing:			
L. If amending name, enter the new name of	the limited llab	ollity company here:		
he new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviati	ion "L.L.C."
Enter new principal offices address, if applicable:		3550 VILLAGE PARK	DR SUITE 240	
Principal office address MUST RE A STREET	ADDRESS)	ORLANDO, FL 32837	(2)	20
			36i	22
Enter new mailing address, if applicable:		3550 VILLAGE PARK	DR SUITE 240	AUG 26
Mailing address MAY BE A POST OFFICE B	(OX)	ORLANDO, FL 32837	(1)	3 1
			E S	<u>ي</u>
3. If amending the registered agent and/or regent and/or the new registered office address		address on our records	, enter the name of th	e new regist
Name of New Registered Agent:	•		—	
New Registered Office Address:	3550 VILLAG	E PARK DR SUITE 240		
		Enter Florida stre	et address	
	ORLANDO		, Florida <u>32837</u>	
		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.

18884530509

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

Title	Name	Address	Type of Action
AMBR	JOSE CORONADO	3550 VILLAGE PARK DR SUITE 240	DAdd
		ORLANDO, FL 32837	-
			≅ Change
AMBR Л	JUAN C CARRANZA	3550 VILLAGE PARK DR SUITE 240	≣Add
		ORLANDO, FL 32837	□Remove
			□ Change
			□Add
		**************************************	□Remove
			Change
			□Add
			☐ Kcmove
			☐ Change
···	**************************************		□Add
			Remove
			☐ Change
			□Add
			ElRemove
			□ Chance

-	

<u>te:</u>	ce date, if other than the date of filing:
. (7)	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
	August 26 2022
tcd _	
tcd _	Avgust 26 2022 Signature of a member or authorized representative of a member