

L22 000376136

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(Address)

(Address)

(City/State/Zip/Phone #)

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2/12/24

COVER LETTER

TO: Registration Section
Division of Corporations

Delfred LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jose A Rodriguez Jr

Name of Person

Delfred LLC

Firm Company

3065 Daniels Road #1225

Address

Winter Garden, FL 34787

City/State and Zip Code

delfredllc@gmail.com

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

For further information concerning this matter, please call:

Jose A Rodriguez Jr

203 589-1929

Name of Person

at (_____) _____

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

2021 JAN 26 PM 4:12
FILED
CLERK OF COURT
TALLAHASSEE, FL

FILED
JAN 26 2021
TALLAHASSEE, FL

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

Delfred 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 08/26/2022 and assigned
Florida document number L22000376136.

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:

(Principal office address MUST BE A STREET ADDRESS)

3065 Daniels Road #1225

Winter Garden, FL 34787

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3065 Daniels Road #1225

Winter Garden, FL 34787

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:

Jose A Rodriguez Jr

New Registered Office Address:

3065 Daniels Road #1225

Enter Florida street address

Winter Garden

Florida


34787

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>
AMBR	Jose A Rodriguez Jr	3065 Daniels Road #1225	<input type="checkbox"/> Add
		Winter Garden, FL 34787	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Giselle Rodriguez	3065 Daniels Road #1225	<input type="checkbox"/> Add
		Winter Garden, FL 34787	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Woof Properties LLC	3065 Daniels Road #1264	<input checked="" type="checkbox"/> Add
		Winter Garden, FL 34787	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 JAN 26 PM 4:12
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE

2024 JAN 26 PM 4:12
DATE
TIME
FL

2007 JUN 26 PM 4:12
DATE
TIME

7

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated January 18th 2024

Typed or printed name of signee