L22000388207

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Somend

JAN 1 0 2023 D CUSHING

COVER LETTER

Division of Corporations		
SURJECT: Fun bu	the Cecz LC Name of Limited Liability Company	
source: _/ d//	Name of Limited Liability Company	
The enclosed Articles of Amendme	ot and fee(s) are submitted for filing.	
Please return all correspondence co	cerning this matter to the following:	
	Cesar Concepçion Name of Person	
	Ceser Cencepaon Name of Person Your by the Cecz //C Firm/Company	
	as 38th St. W. Address	
Bra	denton FL 34205 City/State and 7 in Code	
	City/State and Zip Code Concepcion 9418 icloud com E-mail address: (to be used for future annual report notification)	202
For further information concerning	this matter, please call:	2022 SEF
Casar A. Concepcio	at (941) 726 - \$554 Area Code Daytime Telephone Number	27
Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the following	ng amount:	(J
	00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, rt ficate of Status Certified Copy Certificate of Status &	
Mailing Address: Registration Section Division of Corporation	Street Address: Registration Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tup by	Me Ceer LL	<i>7</i> 1		\mathbb{Z}_{i}	
Na	me of the Limited Liability (A Florida)	Company as it now appears or Limited Liability Company)	<u>1 our records.</u>)		
The Articles of Organization for t	his Limited Liability Co	ompany were filed on <u>Sep</u>	tember 6,22	and assigned	
Florida document number <u>L22</u>	000386207				
This amendment is submitted to a	mend the following:				
A. If amending name, <u>enter the</u>	new name of the limit	ed liability company here:			
The new name must be distinguishable a	nd contain the words "Limit	ed Liability Company," the desig	nation "LLC" or the abbres	/iation "L.L.C."	
Enter new principal offices add	ress, if applicable:			<u> </u>	
(Principal office address MUST	BE A STREET ADDRI	<u>ESS)</u>			
Enter new mailing address, if a	pplicable:				
(Mailing address MAY BE A PO	T				
B. If amending the registered a agent and/or the new registered		office address on our reco	rds, <u>enter the name o</u>	f the new register	
Name of New Registere	d Agent:				
New Registered Office	Address:				
		Enter Florida street address			
		City	, Florida	Zin Code	
New Registered Agent's Signature	o life about a lif	•		Zip Coae	
I hereby accept the appointmen provisions of all statutes relativ accept the obligations of my po being filed to merely reflect a c company has been notified in w	it as registered agent a e to the proper and co sition as registered ag hange in the registered	and agree to act in this cap complete performance of my cent as provided for in Cha	duties, and Lam fam opter 605, F.S. Or, if t	uiliar with and this document is	

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Name Address **Type of Action** MGR Cesar Concepcion 420% 38th St. W. Bradenton FL. DANGE _____ □Remove □Add ____ Change □Add _____ □Remove _____ □Change _____ □Remove _____ □Change _____ □Remove ☐ Change □Remove

___ □Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

f ame	ending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
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'an efl N <u>ote:</u>	If the date inserted in th	the date of filing:
recor d is fi		ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	September 19	2022.
		Signiture of a member or authorized representative of a member
	Cesar Cor	· ·

Filing Fee: \$25.00