L22000440762

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2024

CARLOS VASQUEZ 1415 MINK DR APOPKA, FL 32703

SUBJECT: VASQUEZ FAMILY INVESTMENTS LLC Ref. Number: L22000440762

We have received your document for VASQUEZ FAMILY INVESTMENTS LLC on and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 124A00013345



-2 PM

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations			. ·		
SUBJE	CT:	Vasquez	Family	Investments	UC	
				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:



For further information concerning this matter, please call:

Enclosed is a check for the following amount:

\$25.00 Filing Fee

S30.00 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)

<u>Mailing Address:</u> 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 A TO ARTICLES OF O O	O RGANIZATION	
Vasquez Family Invest (Name of the Limited Liability Compar (A Florida Limited L	av av je now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L}\overline{\lambda}\overline{\lambda}$ 000 440 76 2.	were filed on $07/02/24$ and	nd assigned
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liabi</u>	ility company here:	2024
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable:	ity Company," the designation "LLC" or the abbreviation $\frac{1415}{15}$ Mink DY	
(Principal office address MUST BE A STREET ADDRESS)	<u>Αροργα, + μ, 32403</u> <u>Ρο Βοχ 724</u>	F 10 58
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Clarcona, FL J276	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	Carlos Vasquet	
New Registered Office Address:	3195 ground Ale A	pt 107
<u>non neglatolog onge naarda</u> .	Enter Florida	street address
	Pinellus Park	, Florida <u>32782</u>
	Сілу	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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

. •

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MNGR	Carlos Vasquez	3195 grand Are Apt 107	🏹 Add
		3195 grand Are Apt 107 Pinellus park, FL 33782	🗆 Remove
			□Change
			58 58
			🗆 Remove
			□Change
			🗆 Add
			🗌 Remove
			□Change
<u></u>			🗋 Add
			□Remove
			🗆 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _______(optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated Signature of a member or authorized representative of a member Carlos Vasquet Typed or printed name of signce

Filing Fee: \$25.00