## L22000489004

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## **COVER LETTER**

TO: Registration Section Division of Corporations			<b>)</b>		•	
	BORREJIA	O LLC				
SUBJE	CT:		Name of Lim	ited Liability Company		<del></del>
The and	losed Articles of a	S	al Cartol and order	anise of the Oliver		
			•	•		
Please re	eturn all correspo	ndence concer	ning this matter	to the following:		
		FEDERIO	O A BORRERO	PABON		
				Name of Person		
		ВОККЕЛ	VO LLC			
			_	Firm/Company		
		7500 NW	25TH ST SUFTI	E 237		
			-	Address		<u> </u>
		DORAL, F	L 33122			
				City/State and Zip Code	?	
		_	SOLUTIONS:	NC.NET to be used for future annua	l management times in N	
For turtl	ner information co				ir report nonneation)	
BORREJIAO LLC			866 29 at ( )	96-1833		
-	Name of	Person Person		Area Code	Daytime Teleph	one Number
Enclosed	I is a check for th	e following an	ount;			
□ \$25	00 Filing Fee	□ \$30.00 F Certific	ling Fee & are of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is er		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of Co P.O. Box 632' Tallahassee, F	Section orporations 7		Regist Divisio The Co 2415 N	Address: ration Section on of Corporatio entre of Tallaha: N. Monroe Stree assee, FL 32303	ssee t, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2023 JAN-4 AM 9: 43

**BORREJIAO LLC** 

(Name of the Limited Liability Company as it now appears on our records.)

(100)	(A Florida Limited Lia	bility Company)	
The Articles of Organization for this Limit Florida document number <u>L22000489004</u>		ere filed on08/12/2022	and assigned
This amendment is submitted to amend the	e following:		
A. If amending name, enter the new na	me of the limited liabili	ty company here:	
The new name must be distinguishable and contain	n the words "Limited Liability	Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if a	applicable:		
(Principal office address MUST BE A ST	UREET ADDRESS)		
Enter new mailing address, if applicable	e:		
(Mailing address MAY BE A POST OFF	TCE BOX)		
B. If amending the registered agent and agent and/or the new registered office ac	d/or registered office ad <u>ddress here</u> :	dress on our records, <u>en</u>	ter the name of the new registere
Name of New Registered Agent:	; 		
New Registered Office Address:			
		Enter Florida street ad	lress
		<u> </u>	Florida
		City	Zip Code
New Registered Agent's Signature, if chang			
I hereby accept the appointment as regi, provisions of all statutes relative to the paccept the obligations of my position as being filed to merely reflect a change in company has been notified in writing of	proper and complete po s registered agent as pro t the registered office ac	erformance of my duties ovided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is
	If Changi	ng Pogistarad Apont Signatu	ea of Nov. Panistared Apant

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>	Address	Type of Action
AMBR	Federico A. Borrero Pabon	7500 NW 25TH ST SUFTE 237	□ Add
		DORAL, FL 33122	<b>≡</b> Remove
			□ Change
AMBR	ANTONIO BOLANOS	7500 NW 25TH ST SUITE 237	<b>≣</b> Add
		DORAL, FL 33122	□Remove
			□Change
MGR	INVERPLEX CORP	7500 NW 25TH ST SUITE 237	<b>=</b> Add
		DORAL, FL 33122	□Remove
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f an eife <u>Note:</u>	ve date, if other than the ective date is listed, the date in If the date inserted in this lent's effective date on the	ust be specific and block does not n	l cannot be prior neet the applic	cable statutory	g or more than 90 filing requires	(option) days after fil nents, this d	ing.) Pursu	ant to 60 at be lis	5.0207 (3 ted as th
record d is file	d specifies a delayed effecti ed.	ve date, but not	an effective t	ime, at 12:01	a.in. on the ear	lier of: (b)	The 90th	day afte	er the
ated _	29 DECEMBER 2022								
		Ja.	kkp						