## 122000489004

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(City/State/Zip/Phone #)
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(Document Number)
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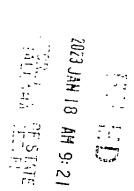
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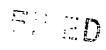
## **COVER LETTER**

Division of Cor	porations					
BORREJIA SUBJECT:	AO LLC					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondence	ondence concerning this matter	to the following:				
	ANTONIO BOLANOS		_			
		Name of Person				
	BORREJIAO LLC					
		Firm/Company	<del></del>			
	7500 NW 25TH ST SUIT	E 237				
		Address				
	DORAL, FL 33122					
	<u> </u>	City/State and Zip Code				
	INFO@JCBSOLUTIONSI					
	E-mail address: (	to be used for future annual report noti	fication)			
For further information of	concerning this matter, please o	all:				
BORREJIAO LLC		866 296-1833				
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres	ss:	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 JAH 18 AM 9:21

BORREJIAO LLC

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

(A Florida Limited Liability Company)

RESTATE

(A Fidua Emin	ica Elabini, Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on	and assigned
Florida document number L22000489004		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited i	liability company here:	
The new name must be distinguishable and contain the words "Limited L	inbility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	City <sup>,</sup>	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>	Address	Type of Action
MGR	INVERPLEX CORP	7500 NW 25TH ST SUITE 237	
		DORAL, FL 33122	■Remove
			□ Change
<del></del>			
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Change
			□Add
			□Remove
		<del> </del>	□ Change
			□Add
			Петюче
			□Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:  (optional)  (ctive 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
.4 * . 61	i 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 ed.
Dated <sub>-</sub>	January 17 () 2023 Juntallung
	Signature of a member or authorized representative of a member
	Fernando Montoya Echeveri
	Typed or printed name observed