

L22000504290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

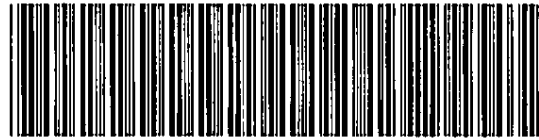
(Business Entity Name)

(Document Number)

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

655 HIALEAH 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 11/30/2022 and assigned Florida document number 1.22000504290.

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)

JUAN D. ROZO

307 SW 15 ST

FORT LAUDERDALE FL 33315

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

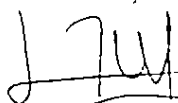
Name of New Registered Agent: JUAN D. ROZO

New Registered Office Address: 307 SW 15 ST
Enter Florida street address

FORT LAUDERDALE, Florida 33315
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	JUAN D. ROZO	307 SW 15 ST	<input type="checkbox"/> Add
		FORT LAUDERDALE FL 33315	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	HECTOR FERNANDO GARCIA	307 SW 15 ST	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE FL 33315	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	ANGELICA VEGA	508 SW 15 ST	<input type="checkbox"/> Add
		FORT LAUDERDALE FL 33315	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SANDRA Y GONZALEZ	655 W 16 ST	<input type="checkbox"/> Add
		HALEAH FL 33315	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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