Laa000530942

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only, oncore) print the my
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

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Special Instructions to Filing Officer:
J. HORNE APR - 4 2024
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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	ING IN USA LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	YERLY K RANGEL CO	ТАМО	
		Name of Person	
		Firm/Company	
	8230 SW 152 ND AVE CI	IR 2	
		Address	
	MIAMI, FL 33193		
	-	City/State and Zip Code	
	yerly0622@gmail.com		
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
YERLY K RANGEL COTAMO		720 2096258	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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)
Mailing Addres		<u>Street Address:</u> Registration Se	ection
Registration Section Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of	
Tallahassee, I	rt 52514	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SUCCEEDING IN USAILLC

(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 Li	ability Company were filed	on 12/20/2022	and assigned	
Florida document number 1.22000530942	·			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liability comp	any here:		
COMUNA UNIVERSAL DE VIDENTES LLC				
The new name must be distinguishable and contain the w	ords "Limited Liability Company	;" the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applications	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>			
B. If amending the registered agent and/or reagent and/or the new registered office address		our records, <u>enter</u>	the name of the new registered	
Name of New Registered Agent:	YERLY K RANGEL COT	AMO		
New Registered Office Address:	New Registered Office Address: 8230 SW 152 ND AVE CIR 2			
	E	uer Florida street address	,	
	MIAMI	. Flo	orida	
	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>	Name	Address	Type of Action
AMBR	JESUS L VERA MALAVER	8230 SW 152 ND AVE CIR 2 MIAMI. FL 33193	□Add
			= Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
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			□Change
			□Add
		· ·	□Remove
			□C \

	
	
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(If an e Note	ctive date, if other than the date of filing:
	ord 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 filed.
ord is	02/26/2024
	filed. 02/26/2024 d
ord is	02/26/2024

Filing Fee: \$25.00