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(F	Requestor's Name)	· <u>-</u>
<u>~</u>	Address)	
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL MAIL
(B	Business Entity Name)	
(D	Occument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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TALLANASSEC, FLORIDA &

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	BIRNIA 1983	, UC	
SUBJECT:		ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	MANUEL R	Name of Person	cumo
		Firm/Company	
	SH W C	LURCH St SI41	
	-	Address	
	OCIANDO	FL 32801 City/State and Zip Code	
			
	Herte E-mail address: (56 Billia 1983, WM to be used for future annual report notif	fication)
For further information co	ncerning this matter, please ca	alt:	
• • • • • • • • • • • • • • • • • • • •	HUFRTA	at (<u>407</u>) <u>373 (</u> Area Code Daytimo	2437
Name of	Person	Area Code Daytum	e Telephone Number
Enclosed is a check for the	e 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 Address:
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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIRRIA	1983 L	LC				
(Name of the Limited	<mark>Liability Compan</mark> Florida Limited Li	y as it now appea ability Company)	rs on our r	ecords.)		
The Articles of Organization for this Limited Liabi		vere filed on	12/28	6/2012	and a	ssigned
If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." er new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable:						
A. If amending name, enter the new name of th	must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." principal offices address, if applicable: ### CIL BUTCH SOLUTION HORAKS SERVAND ### CIL BUTCH SOLUTION HORAKS SERVAND #### CIL BUTCH SOLUTION HORAKS SERVAND ###################################					
The new name must be distinguishable and contain the word	s "Limited Liabilit	y Company," the c	lesignation	"LLC" or the abl	neviation "	L.L.C."
Enter new principal offices address, if applicabl	e:				202	 · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET A	(DDRESS)				<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>			ANSSEF FL	PH 2:	
B. If amending the registered agent and/or regi		idress on our r	records, <u>e</u>	nter the name	e of the n	ew registered
Name of New Registered Agent:	MAN	El Rus	Can	HOZDE	Z SED	Cons
New Registered Office Address:	54 W					
-	ONIB	City		Florida	3080 Zip Code	<u>)</u>

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>	Type of Action
ngl_	MANDEN HUERTA	861 CHERRY VOILEY WAY	□Add
			DRemove
			□Change
MOR	LIZBETH HUERLYD	861 CHERRY PATHER MAN	□Add
			Skemove
			□Change
MGR	MANUEL RICORDO MOROL	ES SELLAND SU W CHURCH ST SIGT	EAdd
		Olianso FL, 32801	□ Remove
			□Change
			🗆 Add
			□Remove
			□Clunge
			□Remove
			□Change
			□ Add
			□Remove
			□Change

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							LWERLA	
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	e date, if other that	te must be specif	tic and cannot	05 31			optional) after filing.) Pursuant to 605	.0207 (ed as t
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Filing Fee: \$25.00