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COVER LETTER

TO: Registration S Division of Co			
MARINS	INSURANCE AGENCY LLC		
SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fec(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Marcio Marins Machado		
		Name of Person	
	MARINS INSURANCE A	Name of Limited Liability Company feets) are submitted for filing. Ing this matter to the following: Is Machado Name of Person SURANCE AGENCY LLC Firm/Company ointe Way Address FL, 34786 City/State and Zip Code kaltenbach.com mail address* (to be used for future annual report notification) atter, please call: 754 2489671 atter, please call: Area Code Daytime Telephone Number unt: Ing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy (additional copy is enclosed)	
		Firm/Company	
	7467 Ripplepointe Way		
		Address	
	Windermere, FL, 34786		
	daniel@danielkaltenbach.ec		
	E-mail address: (to be used for future annual report not	ilication)
For further information	concerning this matter, please c	all:	
Daniel Kaltenbach		754 2489671	
		at ()	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addre		Street Address:	sation.
Registration Division of 0	Section Corporations	Registration So Division of Co	
P.O. Box 63		The Centre of	•
Tallahassee.	FL 32314	2415 N. Monre	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARINS INSURANCE AGENC		
(<u>Name of the Lim</u>	ited Liability Company as it now ap (A Florida Limited Liability Compa	ppears on our records.) my)
he Articles of Organization for this Limited lorida document number	Liability Company were filed or	01/05/2023 and assigned
his amendment is submitted to amend the fol	llowing:	
. If amending name, enter the new name	of the limited liability compan	<u>v here</u> :
ARINS MACHADO CONSULTING LLC		
he new name must be distinguishable and contain the	words "Lamited Liability Company,"	the designation "LLC" or the abbreviation "LLG5"
nter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE		. 5
melyar office address. Herri Million Street		. 25
		F.
iter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE	<i>E BOX</i>)	
		5
If amending the registered agent and/or tent and/or the new registered office address Name of New Registered Agent:		ur records, <u>enter the name of the new regist</u>
New Registered Office Address:	7467 Ripplepointe Way	
New registered Office Address:	Enter	Florida street address
	Windermere	, Florida
		L la eida

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, thereby confirm that the limited liability

company has been notified in writing of this change.

If Changing Penisternet Space Significant Van Heristered 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

Title	<u>Name</u>	Address	Type of Action
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			□Remove
			Change
			□Add
			□ Remove
			Change
			□Add
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			[] (Thange
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fective date	, if other than the is listed, the date mus	date of filing	:			_ (optional)	m 100m to 60\$ 070°
an effective dat ote: If the da	te inserted in this bl	coe specific and ock does not it	cannot be prior teet the applica	io date of fiting of thic statutory f	iling requireme	ays after fining,) re ents, this date wil	I not be listed as
ocument's eff	ective date on the D	epartment of S	tate's records.	•			
	rs a delayed effectiv	e date, but not	an effective ti	ne, at 12:01 a.	m, on the earlie	er of: (b) The 9	Ith day after the
record specifi is filed.		/	2024		,		
is filed.		/·	<i></i> /	—· /	/		
is filed. June, 3rd		<u> </u>	_/_				
is filed. June, 3rd		Signature of act		rizes represente	liv of a member		

Filing Fee: \$25.00