## L23000017610

(Requestor's Name)
(Address)
(Address)
(
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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10/11/23--01036--002 \*\*2S.00

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## **COVER LETTER**

	gistration Sect ision of Corpo			
		ING PROCESSING LLC		
SUBJECT:	<del></del>	Name of Limit	ted Liability Company	
The enclosed	f Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return	all correspond	dence concerning this matter t	o the following:	
		JHON ALEXANDER ESP.	ANOL SANCHEZ	
			Name of Person	
		OUTSOURCING PROCES	SSING LLC	
			Firm/Company	
		407 Lincoln Rd Ste 10E		
			Address	
		MIAMI, FL 33139		
			City/State and Zip Code	
		outsourcingprocessing@gma		
			o be used for future annual report notific	ration)
For further in	nformation cor	acerning this matter, please ca	II:	
JHON ALE	XANDER ESI	PANOL SANCHEZ	754 4571459	
	Name of I	Person	at ()	Telephone Number
Enclosed is	a check for the	following amount:		
<b>≡</b> \$25.00 I	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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OUTSOURCING PROCESSING		
(Name of the Lim	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L	iability Company were filed on $\frac{01/0}{1}$	09/2023 and assigned
Florida document number L23000017610	·	
This amendment is submitted to amend the fol-	lowing:	
A. If amending name, enter the new name of	of the limited liability company her	<u>·e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	207
Principal office address MUST BE A STREE	ET ADDRESS)	دنی
		23
		on on
Enter new mailing address, if applicable:	70.	
(Mailing address MAY BE A POST OFFICE BOX)		
Muning duaress MAT DE ATOST OFFICE	27	
B. If amending the registered agent and/or agent and/or the new registered office addre		cords, enter the name of the new registe
Name of New Registered Agent:	MARCELO P JURADO	
New Registered Office Address:	407 Lincoln Rd Ste 10E	
	Enter Florid	da street address
	МІАМІ ВЕАСН	, Florida
	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.

f 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	MARCELO P JURADO	407 Lincoln Rd Ste 10E	■Add
		MIAMI BEACH ,FL 33139	Remove
			□Change
	<del>.</del>		□Add
			□Remove
			□Change
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<u>iote:</u> I	re date, if other that tive date is listed, the date if the date inserted in t nt's effective date on	his block does not	t meet the applic	able statutory fil:	more than 90 days ing requirements	optional) after filing.) Pursu , this date will n	ant to 605.0207 of be listed as
record I is file	specifies a delayed ef	fective date, but no	ot an effective ti	me, at 12:01 a.m	. on the earlier o	f: (b) The 90th	day after the
ated _	7/28/2	3	n A		M	1	
			, ,	- / // /-	- /		
		Signature of	a member or auth	orized representativ	ve of a member		

Filing Fee: \$25.00



August 23, 2023

JHON ALEXANDER ESPANOL SANCHEZ 407 LINCOLN RD STE 10E MIAMI, FL 33139 US

SUBJECT: OUTSOURCING PROCESSING LLC

Ref. Number: L23000017610

We have received your document for OUTSOURCING PROCESSING LLC and your check(s) totaling \$20.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have received your document for OUTSOURCING PROCESSING LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$5.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 723A00019673

RECEIVED

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