L23000019289

(Re	questor's Name))
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
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Special Instructions to I	Filing Officer:	





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05/20/2024

To whom it May concern:

I Idalmis Socarras Diaz no longer want to be Title AR of the company MOLINAS IMMIGRATION & TAXES SERVICES.LLC, from now on the sole owner of the company will be Danay Molina Socarras, by this means, I officially let you know about this change.

DANAY MOLINA SOCARRAS

IDALMIS SOCARRAS DIAZ

Return Address:

8615 Barot DR apt 110, Naples FL 34104

Phone number: (239)784-5875

COVER LETTER

	Registration S Division of Co			
CUDIE		S IMMIGRATION & TAXES :	SERVICES, LLC	
SUBJEC	.1:	Name of Lim	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		DANAY MOLINA SOCA	ARRAS	
			Name of Person	
			Firm/Company	
		8615 BAROT DR APT 11	0	
			Address	•
		NAPLES FL 34104		
			City/State and Zip Code	
		MOLINASIMMIGRATIO		
			to be used for future annual report notification)	
For furth	er information of	concerning this matter, please c	all:	2.1
DANAY	MOLINA SO	CARRAS	239 784-5875 at ()	·
	Name o	of Person	Area Code Daytime Telephone Nu	mber
Enclosed	l is a check for t	he following amount:		
□ \$25.	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Certified Copy	00 Filing Fee, ifficate of Status & iffied Copy tional copy is enclosed)
	Mailing Addre		Street Address:	
Registration Section Division of Corporations			Registration Section Division of Corporations	
	P.O. Box 632		The Centre of Tallahassee	
	Tallahassee,	FL 32314	2415 N. Monroe Street, Sui	te 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOLINAS IMMIGRATION & TA			
(Name of the Limit	ed Liability Compa (A Florida Limited l	iny as it now appears on our rec Liability Company)	cords.)
The Articles of Organization for this Limited Li		were filed on 01/09/2023	and assigned
Florida document number L23000019289	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
MOLINAS IMMIGRATION & TAXES SERVICE	ES LLC		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	1888 40TH TER SW	
(Principal office address MUST BE A STREE	T ADDRESS)	NAPLES FL 34116	, , , , , , , , , , , , , , , , , , ,
Enter new mailing address, if applicable:		8615 BAROT DR APT 110	0
Mailing address MAY BE A POST OFFICE	BOX)	NAPLES FL 34104	<u>-</u>
			: 3
B. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent:	ss here:	address on our records, <u>en</u> INA SOCARRAS	ter the name of the new registe
Name of New Registered Agent.			
New Registered Office Address:	8615 BAROT 1		
		Enter Florida street ad	
	NAPLES		, Florid a <u>34104</u>
		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>	Type of Action
AR	IDALMIS SOCARRAS DIAZ	2617 TROPICANA BLVD APT DI NAPLES, FL	
		NO LONGER WANT TO BE IN THE COMPANY	≅Remove
			□Change
MGR	DANAY MOLINA SOCARRAS	8615 BAROT DR, APT 110 NAPLES, FL 34104	□Add
			□Remove
		TO BE AR	Change
			□Add
			□Remove
			□Change
			∵. <u>``</u> □Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

COMPANY. LEAVE DANA	AY MOLINA SOCARRAS AS 100	% OWNER OF THE COMPANY	r and
MANAGER.			
· · · · · · · · · · · · · · · · · · ·			
			· · · · · · · ·

			- 1
ive date, if other than the ective date is listed, the date must If the date inserted in this ble ent's effective date on the De	date of filing: the specific and cannot be prior to date cock does not meet the applicable starpartment of State's records.	(optional of filing or more than 90 days after filing tutory filing requirements, this dat	l) g.) Pursuant to 605 te will not be list
d specifies a delayed effective led.	e date, but not an effective time, at 1	12:01 a.m. on the earlier of: (b)	The 90th day afte
MAY 20	, 2024		
	(/NF -)		