L23000029438

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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	ZQUIERDO	CASTANIER LLC							
SUBJECT: _		Name of Lim	nited Liabilii	ty Company					
		mendment and fee(s) are sub		-					
		PEDRO SALAMANCA							
			Nan	ne of Person		•			
		REAL BUSINESS TAX I	LC						
			Fire	n/Company					
		6000 METROWEST BLV	D SUITE	200					
				Address			SE	2023	
		ORLANDO, FL. 32835						•	٠
			•	te and Zip C	ode		t fr	7	1
		PESLEON@GMAIL.COM E-mail address: (\ (and moved and			:	
For further info	ormation co	ncerning this matter, please c		or thine an	nuai rejam nom	(Catton)	LL TOP	7 J2	
PEDRO SALA	AMANCA			407	860-5750		Ď,	.>>	
	Name of	Person	at	(Area Code	Daytime	: Telephone Number			
Enclosed is a c	heck for the	e following amount:							
≡ \$25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	Ce	.00 Filing : rtified Cop litional copy	У	Certified	te of Stati		
Regi Divi	ng Address stration So sion of Co Box 6327	ection orporations		Reg Div	et Address: istration Sec ision of Corp Centre of T	oorations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IZQUIERDO CASTANIER LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	iny as it now appears on our records Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L23000029438	were filed on <u>01/17/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		702 FALSE
		,
Enter new mailing address, if applicable:		m- 4 1
(Mailing address MAY BE A POST OFFICE BOX)	· ·	
		₹
B. If amending the registered agent and/or registered office	address on our records, <u>enter</u>	the name of the new registe
agent and/or the new registered office address here:		
Name of New Registered Agent:	<u> </u>	
Nam Davistand Office Address.		
New Registered Office Address:	Enter Florida street address	
	El.	rida
	, r.to	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
MGR	CAROLINA IZQUIERDO	3121 ARMSTRONG SPRING DR KISSIMMEE,	FL. ?
			□Remove
			□Change
			□Add
			□Remove
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ffective date, if other than the dan effective date is listed, the date must listed. If the date inserted in this blococument's effective date on the Department.	be specific and cannot be pric ck does not meet the appli	or to date of filing or more	(option re than 90 days after the requirements, this	iling.) Pursuan	t to 605.02 be listed
record specifies a delayed effective	date, but not an effective	time, at 12:01 a.m. or	n the earlier of: (b)	The 90th d	
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l is filed. JANUARY 24 ated	·	-//W	1		11/28
1 is filed. JANUARY 24 ated	· 2023	horized representative of	of a piember		

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