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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

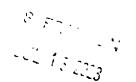
Office Use Only



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COVER LETTER

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TO:

TO: Registration Sc Division of Cor				
SUBJECT: EGIDE CAPITAL BUSINESS SOLUTIONS LLC Name of Limited Liability Company				
Please return all correspo	ondence concerning this matter	to the following:		
		Sonia Becerra		
		Name of Person		
		Swyft Filings		
		Firm/Company		
		3 Greenway Plaza #1320		
		Address		
		Houston, TX 77046		
		City/State and Zip Code		
		CAPITAL BUSINESS SOLUTIONS L to be used for future annual report notification)	LC	
For further information e	oncerning this matter, please c			
Sonia B	ecerra	at (877 777-0450		
Name o	f Person	Area Code Daytime Telephone	Number	
Enclosed is a check for the	ne following amount:			
▼ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)	
Mailing Addres Registration S		Street Address: Registration Section		
Division of C		Division of Corporations		
P.O. Box 632	7	The Centre of Tallahassee		
Tallahassee, I	FL 32314	2415 N. Monroe Street, S	uite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EGIDE CAPITAL BUSINESS SOLUTIONS LLC

The Articles of Organization for this Limited Liability Company were filed on	(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears liability Company)	on our records.)	<u>_</u> _
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L. Conter new principal offices address, if applicable: 1000 Brickell Ave, Suite 715 # 163	1,000,000,40440	were filed on	01/23/2023	and assigno
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC". Inter new principal offices address, if applicable: 1000 Brickell Ave, Suite 715 # 163	his amendment is submitted to amend the following:			
Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida	If amending name, enter the new name of the limited liabi	lity company her	re:	
Principal office address MUST BE A STREET ADDRESS) Miami, FL 33131 1000 Brickell Ave, Suite 715 # 163 Miami, FL 33131 Mia	he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the de-	signation "LLC" or the abb	oreviation "L.L.C."
Principal office address MUST BE A STREET ADDRESS) Miami, FL 33131 1000 Brickell Ave, Suite 715 # 163 Miami, FL 33131 Miami, FL 33131 Miami, FL 33131 B. If amending the registered agent and/or registered office address on our records, enter the name of the new igent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Inter new principal offices address, if applicable:	1000 Brick	cell Ave, Suite 715	# 163
Mailing address MAY BE A POST OFFICE BOX) Miami, FL 33131 B. If amending the registered agent and/or registered office address on our records, enter the name of the new gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	• • •	Miami, FL 3	33131	202
Mailing address MAY BE A POST OFFICE BOX) Miami, FL 33131 B. If amending the registered agent and/or registered office address on our records, enter the name of the new gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida				v*
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Name of New Registered Agent: New Registered Office Address: New Registered Office Address:	• • • • • • • • • • • • • • • • • • • •	Miami, FL	33131	
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	THE BOX	·	•	
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida			······································	
New Registered Office Address: Enter Florida street address , Florida	3. If amending the registered agent and/or registered office a	· -		e of the new re
Enter Florida street address , Florida	Name of New Registered Agent:			<u> </u>
, Florida	New Registered Office Address:		<u></u>	
		Enter Floria	la street address	
City Zip Code			, Florida	
		Ciţv		Zip Code

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 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
MGR	CARLOS G BETANCOURT	1395 BRICKELL AVE, SUITE 800	□Add
		MIAMI, FL 33131	X Remove
			□Change
MGR	CARLOS G BETANCOURT	1000 Brickell Ave, Suite 715 # 163	X Add
		MIAMI, FL 33131	□ Remove
			□ Change
	<u> </u>		
			Remove
			□Change
			□ Add
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			□Change
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an cf <u>ote:</u>	ive date, if other than the date of filing:
recor	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the led.
ated	April 23/2023 , Miami, FL
ated	X Signature of a member or authorized representative of a member