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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TAX 5 PRO CORP Account Number : 120200000147 Phone : (786)307-2733 Fax Number : (954)420-7118

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: INFO@TAXSPRO.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **JOSE BRINEZ LLC**

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FEB 20 2023

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COVER LETTER

TO: Registration S Division of Co			
	INEZ LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	ANWAR I PUELLO		
		Name of Person	
	TAX S PRO CORP		
		Firm/Company	
	8030 PINES BLVD		
		Address	
	PEMBROKE PINES FL	33024	
		City/State and Zip Code	
	INFO@TAXSPRO.COM	to be used for future annual report notificatio	<u>n)</u>
For further information	concerning this matter, please c	·	·· ,
ANWAR I PUELLO		786 3072733	
Name	of Person		phone Number
Enclosed is a check for	the following amount:		
₩ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailine Addre		Street Address:	
Registration Division of (Registration Section Division of Corporat	
P.O. Box 63		The Centre of Tallah	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: +19544207118 (TAX S PRO)

ability Company as it now appears on our records.) lorida Limited Liability Company)		
ity Company were filed on 02/01/2023	and assigne	d
g:		
limited liability company here:		
"Limited Liability Company," the designation "LLC" of	the abbreviation "L.L.C."	
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DDRESS)		
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Enter Florida street address		<u> </u>
		.
City, Florid		<u>y</u>
	tered office address on our records, enter the ere: Enter Florida street address , Florida	and assigne Ig: Ilmited liability company here: "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." DDRESS) Enter Florida street address Florida

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 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>	Address	Type of Action
AMBR	LABRADOR MANAREZ, MILEX		\Add
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From: +19544207118 (TAX S PRO)

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	02-16-23
Effective date, if other than the	e date of filing:(optional) ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0.
	lock does not meet the applicable statutory filing requirements, this date will not be listed
document's effective date on the D	
ne record specifies a delayed effectiv	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
ord is filed.	•
Dated 02-16	2023
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	MANN
· ·	Signifier of a member or authorized representative of a member
,	7
JOSE BRINEZ (
	Typed or printed name of signee