

L23000073748

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(Business Entity Name)

(Document Number)

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2024 JAN 17 PM 6:02

SECRETARY OF STATE
ALL/AMSSSEC.FL



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Modify the name of F&N BUSINESS LLC, remove, change title and add members.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FREIDY SALAS

Name of Person

F&N BUSINESS LC

Firm/Company

1380 NE MIAMI GARDENS DR. STE 282

Address

NORTH MIAMI BEACH FL 33179

City/State and Zip Code

immigratesolutions@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FREIDY SALAS

754

610-8723

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

F&N BUSINESS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/09/2023 and assigned
Florida document number 123000073748.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

F&N IMMIGRATE SOLUTIONS LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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2024 JAN 17 PM 6:03
SECRETARY OF STATE
TALLAHASSEE FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

_____, 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.

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>	<u>Type of Action</u>
AR	Niniveth Silva	1375 NW 181st Miami Fl, 33169	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Change a MGR	<input checked="" type="checkbox"/> Change
MGR	Chrisell Salas	1375 NW 181st Miami Fl, 33169	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Christian Salas	1375 NW 181st Miami Fl, 33169	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Freidy Salas Gonzalez.	1375 NW 181st Miami Fl, 33169	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: 01/10/2024 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated January 10th 2024



Signature of a member or authorized representative of a member

Freidy Salas

Typed or printed name of signee



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Detail by Entity Name

Florida Limited Liability Company

F&N BUSINESS LLC

Filing Information

Document Number L23000073748

FBI/EIN Number NONE

Date Filed 02/09/2023

Effective Date 02/02/2023

State FL

Status ACTIVE

Principal Address

1380 NE MIAMI GARDENS DR STE 282

north MIAMI beach, FL 33179

Mailing Address

1380 NE MIAMI GARDENS DR STE 282

north MIAMI beach, FL 33179

Registered Agent Name & Address

SALAS, FREIDY

1375 NW 181ST STREET

MIAMI, FL 33169

Authorized Person(s) Detail

Name & Address

Title MGR

SALAS, FREIDY

1375 NW 181ST STREET

MIAMI, FL 33169--414

Title AR

SILVA, NINIVETH

1375 NW 181ST STREET

MIAMI, FL 33169--414

Title AR

SALAS, CHRISTIAN
1375 NW 181ST STREET
MIAMI, FL 33169--414

Title AR

SALAS GONZALEZ, FREIDY
1375 NW 181ST STREET
MIAMI, FL 33169--414

Annual Reports

No Annual Reports Filed

Document Images

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