# LZ3 DDOD 87624

(Re	equestor's Name)
(Ac	Idress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
	WAIT MAIL
(Bu	usiness Entity Name)
(Dc	ocument Number)
Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only

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# **COVER LETTER**

1 O: Registration Se Division of Cor			
GIUALE L	C		
SUBJECT:	Name of Lun	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ndence concerning this matter	to the following:	
	Francesco Sanna		
		Name of Person	
		Firm/Company	
	2851 NE 183rd Street Apt	· · · · · · · · · · · · · · · · · · ·	
		Address	
	Aventura Fl 33160		ė
	francesco.kristal@gmail.co	City/State and Zip Code	· • • •
		to be used for future annual report notifica	ation)
For further information co	oncerning this matter, please c	all:	5
l rancesco Sanna		631 377-1753 at ()	
Name o	Person	Area Code Daytime T	elephone Number
	2 <b>1</b> 1		
Finclosed is a check for th			\$60.00 Filing Fee.
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Secti	on
Division of C	orporations	Division of Corpo	prations
P.O. Box 632 Tallahassee, I		The Centre of Tal 2415 N. Monroe 3	
		Tallahassee, FL 3	2303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GIUALE 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  $\frac{02/17/2023}{2000087624}$  and assigned Florida document number  $\frac{1.23000087624}{2000087624}$ .

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDRESS)	;		<u></u>
		:	·
			1 こ)
Enter new mailing address, if applicable:			<del>:-</del> ·
(Mailing address MAY BE A POST OFFICE BOX)			

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street aa	
	City	, Florida ZipCode

### 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

### MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	Andrea Sierra	2851 NE 183RD STREET APT 1801 Aventura I	1 331€ ⊡Add
			Remove
			Change
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			□Change

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

1.17 . -- 5 <u>...</u> Ę

E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_(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) \_ (optional) 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.

Signature of a member of authorized representative of a member	das-	ed	2023
Signature of a member of authorized representative of a member			
Signature of a member of authorized representative of a member			
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			signified of a memory of automatic representative of a memory

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Typed or printed name of signee