L23000104668

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COVER LETTER

Registration Section Division of Corporations

TO:

PEREZ (SUBJECT:	CUADROS, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fec(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	VICTOR PARRA				
		Name of Person			
	GLOBAL BUSINESS IN	T"L CORP			
		Firm/Company			
	7950 NW 53RD ST SUIT	E 342			
		Address			
	DORAL, FL, 33166				
		City/State and Zip Code			
	TAXES@GBIACCOUNT				
	E-mail address; (to be used for future annual report not	ification)		
For further information	concerning this matter, please c	all:			
VICTOR PARRA		786 2018304			
Name	of Person	Area Code Daytin	ne 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		Division of Co The Centre of	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

PEREZ CUADROS, 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 FEBRUARY 27, 2023 and assigned Florida document number L23000104668 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida j

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.

City

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>	Address	Type of Action
AMBR	VALERIA, FORERO	7950 NW 53 ST, 342. DORAL, FL 33166	= Add
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ffective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo ocument's effective date on the De	be specific and ca ck does not mee	innot be prior to et the applicab			s after filing.) Pursu	
record specifies a delayed effective d is filed.	date, but not an	effective time	e, at 12:01 a.m	on the earlier of	of: (b) The 90th	day after the
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Filing Fee: \$25.00