#### H23000357711 3

# Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000357711 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_			
т	_	٠	
	v		

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPERIAX Account Number : 120200000010

Phone : (497)777-7478

Fax Number : (321)206-9743

			address										
 ลก	nual	report	: mailin	gs.	Enter	only	one	email	add	res	s ple	ase,	**

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TREASURES M&T LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY OCI 13 2023

H23000357711

Taliahassee, FL 32314

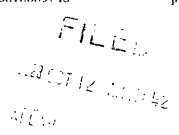
TO:

#### H23000357711 5 **COVER LETTER**

TO: Registration Se Division of Cor					
	ES M&T LLC				
SUBJECT:	Name of Limit	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.			
Please return all correspo	ondence concerning this matter t	to the following:			
	TATIANA M ROMERO B	ARRERO			
		Name of Person			
		Firm/Company			
	1815 PORTOFINO BLVD				
		Address			
	ORLANDO, FL 32824				
		City/State and Zip Code			
	E-mail address: ()	to be used for future annual report not	fication)		
For further information of	concerning this matter, please or	all:			
TATIANA M ROMER	O BARRERO	321 310-0523 at ()			
Name (	of Person	Area Code Daytim	e 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)	Cortificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addr		Street Address: Registration Se	ection		
Registration Division of	Corporations	Division of Corporations			
P.O. Box 63	27	The Centre of 24!5 N. Monre	Tallahassee ne Street, Suite 810		
Taliahassee.	. ビレ 32314	ATAU 11. (11011)			

Tallahassee, FL 32303

# H230003577113 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TREASURES M&T LLC

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

The Articles of Organization for this Limited Li Florida document number		on 03/02/2023	and assigned		
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	f the limited liability compa	ny here:			
The new name must be distinguishable and contain the w	rords "Limited Liability Company,	"the designation "LL	.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	,				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	BOX)				
B. If amending the registered agent and/or		our records, ente	er the name of the new register		
agent and/or the new registered office addre	ss here:	,			
Name of New Registered Agent:	JOSE SANCHEZ PALMA	AR			
New Registered Office Address:	\1039 S HIAWASSE RD A	APT 2918			
	Enter Florida street address				
	\ORLANDO		Florida \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	City		Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as register		and the state of	e d		

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

H23000357711 3

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
AMBR	TATIANA M ROMERO BARRER	1815 PORTOFINO BLVD	□Add
		ORLANDO, FL 32824	
			☐ Change
			· · · · · · · · · · · · · · · · · · ·
			ORemove 7
			□ Change
			□Add .
			∏Remove
			□ Change
			□Add
			☐ Change
			- Remove
			Change

## H23000357711 3

	في المانية الم	
<del></del>	7 O	
	FC	
<b></b>	= F	
	lete if other thun the date of filing:	
Nate: If:	late, if other than the date of filing:	.020 ed a
e record s rd is filed.	ecities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after	r thu
Dated _	10/12/2023	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member  JOSE SANCHEZ PALMAR  Typed or printed name of signee	

H23000357711 3

Filing Fee: \$25.00