L23000113628

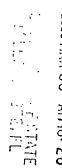
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

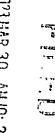
Office Use Only



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COVER LETTER

	Registration Se Division of Cor						
SUBJEC	RELIABLE	MANAGEMENT FOR YOU	LLC				
00000		Name of Lim	ited Liability Company				
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ndence concerning this matter	to the following:				
		IGNANCIO FIGUEROA					
			Name of Person				
	RELIABLE MANAGEMENT FOR YOU LLC						
Firm/Company							
2227 W 69TH STREET #2							
Address							
	HIALEAH, FL 33016						
			City/State and Zip Code			r-3	
RELIABLEMANAGEMENT4U@GMAIL.COM					, ,	023	
			to be used for future annual report notification)	<u>i</u> -		2023 HAR]
For furth	er information c	oncerning this matter, please c	all:	-		30	# 12.°
IGNACI	O FIGUEROA		305 343-8670	:	, , , , , , , , , , , , , , , , , , ,		1
	Name o	f Person	at ()	lumber [福10: 26	<u></u>
Enclosed	is a check for th	ne following amount:			,		
₩ \$25.0	90 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	0.00 Filing Fee ertificate of Sta ertified Copy Iditional copy is e	atus &		

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

	City	Zip Code		
		orida		
New Registered Office Address:	Enter Florida street address	s		
Name of New Registered Agent:				
agent and/or the new registered office address her	<u>:e</u> :	, . ,		
B. If amending the registered agent and/or registe	ered office address on our records, enter	the name of the ne	Negister	ed
	,	7.66 315	<u> </u>	ئىت
(Mailing address MAY BE A POST OFFICE BOX)		(. (· · · · · · · · · · · · · · · · ·	<u> </u>	4
Enter new mailing address, if applicable:		•		• • •
Enter many mailing address of applicables		:		7 T
		,	ಷ	3 4
(Principal office address MUST BE A STREET AD	IDKE22)	*:	2:	
Enter new principal offices address, if applicable:				
-			, = , = ,	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC"	" or the abbreviation "L	.L.C."	
A. If amending name, enter the new name of the l	limited liability company here:			
This amendment is submitted to amend the following				
Florida document number L23000113628	 •			
The Articles of Organization for this Limited Liabilit	y Company were filed on	and ass	ngnea	
	03/03/2023			
(Name of the Limited Lia (A Flo	hility Company as it now appears on our records orda Limited Liability Company)	<u>s.</u>)		
RELIABLE MANAGEMENT FOR YOU				

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>	Address	Type of Action
MGR	LESLIE FIGUEROA	2227 WEST 69TH STREET #2	
		HIALEAH, FL 33016	CRemove
			■ Change
			□Add
			□Remove
			Change
			Remove r
			STATE CHARGE
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			Remove
		***************************************	□Change
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ffective date if other than th	e date of fili	03/23/2023		(antion:	al)	
an effective date is listed, the date mi	ust be specific ar	ng:nd cannot be prior to	o date of filing or more	(options than 90 days after fili	ing.) Pursuant	to 605.0207
an effective date is listed, the date miliote: If the date inserted in this b	ust be specific at block does not	ng:nd cannot be prior to meet the applical	o date of filing or more ble statutory filing r	than 90 days after fill	ing.) Pursuant	to 605,0207 be listed as
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Effective date, if other than the fan effective date is listed, the date mover: If the date inserted in this belocument's effective date on the large of the date	ust be specific at block does not Department of ive date, but no	ng:nd cannot be prior to meet the applical State's records. ot an effective time	ble statutory filing r	than 90 days after fili equirements, this da	ing.) Pursuant ate will not b	y after the

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Filing Fee: \$25.00