L23000132119

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COVER LETTER

	egistration Section Section Section of Corp.			·	
-		101 INTERNATIONAL LC			
SUBJECT	l:	Name of Limi	ted Liability Company		
The enclos	sed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please rett	ırn all correspo	ndence concerning this matter	to the following:		
		ALEXANDER G CUBAS		_	
		-	Name of Person		
		ALEXNADER G. CUBAS	6, P.A.		
			Firm/Company		
3105 NW 107 AVENUE SUITE 602A					
			Address		
		DORAL, FL 33172			
			City/State and Zip Code		
		ACUBAS@CUBASLAW.0	to be used for future annual	report notification)	
For furthe	r information c	oncerning this matter, please c			
ALEXAN	IDER G. CUBA	AS	305 595	-6337	
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	is a check for the	he following amount:			
■ \$25.0	00 Filing Fee	(2) \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is end	Certificate of Status &	
	Mailing Addres		Street A		
Registration Section Division of Corporations		•	Registration Section Division of Corporations		
]	P.O. Box 632	27	· · · · =	ntre of Tallahassee	
	P.O. Box 632 Tallahassee,		· · · · =	, Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUSINESS 101 INTERNATIONAL LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L23000132119}{L23000132119}$	were filed on 03/14/2023	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	2023 .
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbre	
Enter new principal offices address, if applicable:		30
(Principal office address MUST BE A STREET ADDRESS)		
		06 1:
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:		
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 agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agre- performance of my duties, and I am far provided for in Chapter 605, F.S. Or, if	niliar with and this document is
If Char	nging Registered Agent, Signature of New Regis	tered 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	MILDRED CARREON	3105 NW 107 AVENUE STE 602A	🖬 Add
		DORAL FL 33172	□Remove
			□Change
			□Add
			□ Remove
<u></u>			
			□Remove
			☐ Change
			□Add
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			□Add
			Remove
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<u>.</u>			□Add
			□Remove
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		JUNE 6, 2	2023			
ective date, if other than the effective date is listed, the date mu	st be specific a	nd cannot be price	or to date of filing	or more than 90 c	_ (optional) lays after filing.)	Pursuant to 605.020
te: If the date inserted in this brument's effective date on the I	lock does not	meet the appl	icable statutory	filing requireme	ents, this date	vill not be listed a
cord specifies a delayed effecti	ve date, but n	ot an effective	time, at 12:01	a.m. on the earli	er of: (b) The	90th day after th
s filed.						
JUNE 6		2023				
		1	7			
		.// 54	・ / `	_		

Filing Fee: \$25.00