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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC. Account Number : 120190000044 Phone : (407)888-3131 Fax Number : (688)453-0509

\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\* . . .

Email Address: MCCantontaltaxZax11.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CARIBE GARCIA LLC

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## **COVER LETTER**

Division of Cor			
CARIBE G	ARCIA LLC		
30bJeC1:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ED KOTLER		
		Name of Person	
	TAX ZONE INC		
		Firm/Company	
	8865 COMMODITY CIR		
	the continuous of a filter of the August to the	Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	ACCOUNTANT@TAXZO		<del></del>
	12-mail address: {i	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co	1]:	
ED KOTL <b>ER</b>		407 888-3131	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
☐ \$25.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55,00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	☐ \$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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 To:

18884530509

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARIBE GARCIA LLC				
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) mited Liability Company)			
The Articles of Organization for this Limited Liability Con Florida document number <u>L23000150141</u>	npany were filed on 03/24/2023	aı	nd assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	d Hability company here:			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or th	c abbreviati	ion "L.I	C."
Enter new principal offices address, if applicable:			·	
(Principal office address MUST BE A STREET ADDRES	<u>cs)</u>			<del></del>
Enter new mailing address, if applicable:		مدين كالد ليرومكني يودو يود و		
(Mailing address MAY BE A POST OFFICE BOX)		····		·
		<u> </u>	2023	A Sample of the Park
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	dfice address on our records, <u>enter the p</u>	ame of the	ne <u>new</u> C	registere
Name of New Registered Agent:			~	<u> </u>
New Registered Office Address:		F ( ( )   )	<u>∵</u> ₹	
	Enter Florida street address	: ~	30	
	, Florida		Code	

### 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.

#### From; Tax Zone

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

2023-04-12 18:39:28 GMT

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	INES GARCIA	2308 ST MARTIN CT	≅Add
		KISSIMMEE, FL 34741	□Remove
			☐ Change
			□ Add
			Remove
			[]Change
<del></del>			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
		□Add	
		□ Петоче	
		AMERICAN STREET, STREET, SANS STREET,	□Change
			□ Add
			□Remove

-	
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<u></u>	
an effecti ote: 1f	date, if other than the date of filing:  (optional)  ve 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
record s is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	April 12  Signature of a member or nuthorized representative of a member  Took 1015 Carross of
	- tale of Georgia.
	Signature of a member or authorized representative of a member    Column