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COVER LETTER

	Registration Se Division of Cor		•				
eub itea		GONZALEZ, LLC					
SUBJECT		Name of Lin	nited Liability Company				
The enclos	sed Articles of	Amendment and fec(s) are sub	omitted for filing.				
Please rett	am all correspo	indence concerning this matter	to the following:				
		DORA E. GONZALEZ VALBUENA					
			Name of Person				
			Firm/Company	·			
		169 BUTLER COVER					
			Address				
	PANAMA CITY BEACH, FL 32413						
			City/State and Zip Code	• •			
		E-mail address: (to be used for future annual report no	ification)			
For further	r information c	oncerning this matter, please c	all:				
DORA E.	GONZALEZ	VALBUENA	57 312 351291				
Name of Person		Area Code Daytin	ne Telephone Number				
Enclosed i	ís a check for th	ne following amount:					
□ \$25.0t	0 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		<u>Street Address:</u> Registration Se					
	Division of C		Division of Co				
	P.O. Box 632 Fallahassee, I		The Centre of 2415 N. Monro	t attanassee oe Street, Suite 810			

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited L	ny as it ngw appears on our re- liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company Florida document number L23000175589	were filed on <u>04/09/2023</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	"LLC" or the abbreviation "L.L.C."	
From a majorial offices address if applicables	169 BUTLER COVER		
Enter new principal offices address, if applicable:	PANAMA CITY BEACH, FL 32413		
(Principal office address MUST BE A STREET ADDRESS)		23 50	
			T
	169 BUTLER COVER		
Enter new mailing address, if applicable:	PANAMA CITY BEACH	1 FI 32413 · · · 60	
(Mailing address MAY BE A POST OFFICE BOX)	TARAMA CITTOSATO.	(海町 <u>全</u> 一	1
		<u> </u>	$\overline{}$
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	uddress on our records, <u>e</u>	nter the name of the new register	red
Name of New Registered Agent:			
N. D. '. I Off - Address.			
New Registered Office Address:	Enter Florida street oddress		
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent;	<u>:</u>		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my dutie provided for in Chapter (es, and I am jamitiar with and 605, F.S. Or, if this document is	he

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>	Name	Address	Type of Action
MGR	PAULA A MORENO GONZALE?	BOSQUE SAN ANGEL CRA 6 SUR #72-80	⊟ Add
		TORRE 14, APT 11-55	🗆 Remove
		IBAGUE, TOLIMA, COLOMBIA	□Change
MGR	JUAN D MORENO GONZALEZ	CALLE 3 BIS #68-40, CONJUNTO RESIDENCIAL	_ ≣Add
		AMERICAS 3, TORRE 6, APT 601	□ Renюve
		BOGOTA, D.C. COLOMBIA	□Change
MGR	LAURA A MORENO GONZALEZ	169 BUTLER COVER	≅ Aḋd
		PANAMA CITY BEACH, FL 32413	□Remove
			Change
MGR	ISAAC MORENO AGUIRRE	CALLE 79, #17C-39 CONDOMINIO PALMA DEL	🗒 Add
		VERGEL, CASA 73, IBAGUE, TOLIMA	□Remove
	•	COLOMBIA	_ 🗆 Change
			_ 🗆 Add
			🗆 Remove
•			Change
			□ Add
			_ □Remove
			_ Change

	-
	
	(
Effective date, if other than the date of filing:	(optional)
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	filing or more than 90 days after filing.) Pursuant to 605.0207 atory filing requirements, this date will not be listed as
e record specifies a delayed effective date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
Dated	
Signature of a member or authorized repr	

Filing Fee: \$25.00

Typed or printed name of signee