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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	•		
OC& HS L SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CAROLINA GARCIA, C	PA	
		Name of Person	
	CG PRO BUSINESS COS	SULTING LLC	
		Firm/Company	
	9100 CONROY WINDER	MERE RD SUITE 200	
	1181	Address	
	WINDERMERE, FL 3478	36	
		City/State and Zip Code	
	INFO@CGPROBUSINESS		
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please c	all:	
CAROLINA GARCIA		786 594-1269	
Name o	t Person	at () Area Code Dayt	ime Telephone Number
Enclosed is a check for th	he following amount:		
■ \$25.00 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 Addres		Street Address:	Continu
Registration Section Division of Corporations		Registration S Division of C	
P.O. Box 632		The Centre of Tallahassee	

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited L	Liability Company were filed on $\frac{0}{2}$	4/10/2023 and assigned
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name o	of the limited liability company l	<u>nere</u> :
N/A		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)	2028 JUN -9 AM SECKE LARY UITALL LAHASSEE F
B. If amending the registered agent and/or agent and/or the new registered office addre		
Name of New Registered Agent:	MONICA M URIBE	<u>-</u>
New Registered Office Address:	4650 WASHINGTON ST UNIT	302
New Negisland Strice Address.	Enter Fl	orida street address
	HOLLYWOOD	, Florida 33021
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

OC & HS LLC

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>	<u>Address</u>	Type of Action
MGR	MONICA M URIBE	4650 WASHINGTON ST UNIT 302	≡ Add
		HOLLYWOOD, FLORIDA 33021	□Remov e
			□Change
MGR	RODRIGO OCHOA	4650 WASHINGTON ST UNIT 302	□Add
		HOLLYWOOD, FLORIDA 33021	Remove
			□Change
			□ Add
			□Remove
			■Change
			□Add
			□Remove
			Change
			□Add
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N/A			
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ective date, if other tha	in the date of filing:		_ (optional)
effective date is listed, the defective date inserted in	ate must be specific and cannot be prior to this block does not meet the applica	o date of filing or more than 90 d ble statutory filing requireme	ays after filing.) Pursuant to 605.020 ents, this date will not be listed to
ument's effective date or	the Department of State's records.	, , ,	
	ffective date, but not an effective tin	ne, at 12:01 a.m. on the earlie	er of: (b) The 90th day after th
s filed.			
ed		_ ` .	
	Signature of a member or author	Ĺ	
	Signature of a member or author	fized representative of a member	
	7		