## L23000180598

(Re	equestor's Name)	
(Ad	ddress)	
(A.c	ddress)	<del></del>
(Ci	ity/State/Zip/Phone#	)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	· ¬
		1/N

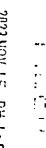




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## **COVER LETTER**

TO:	Registration Se Division of Cor			
/** I ** 441	TELENER			
SUBJEC	CT:	Name of Lim	ited Liability Company	
Please re	eturn all correspo	indence concerning this matter	to the following:	
			Name of Person	<del></del>
		ESK CLIENT SERVICES	ENT SERVICES LLC  Firm/Company  CAYNE BLVD STE 300-24  Address  PL 33137  City/State and Zip Code  QUEZ@SMARTKEEP.COM  E-mail address: (to be used for future annual report notitication)  s matter, please call:  at (	
		<u></u>		
		2915 BISCAYNE BLVD S	STE 300-24	
		<del></del>	Address	
		MIAMI, FL 33137		
			City/State and Zip Code	····
		E-mail address: (	to be used for future annual report noti	tication)
For furtl	her information c	oncerning this matter, please co	all:	
ALEJA	NDRA HENRIQ	UEZ	•	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for the	he following amount:		
□ <b>\$</b> 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Address Registration 5 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Registration Se Division of Cor The Centre of T	porations Fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TELENERSYS LLC		<u></u>
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records Liability Company)	1)
The Articles of Organization for this Limited Liability Company Florida document number 1.23000180598	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
• •		23
mapar office against sector 2227. This is a section of the		
		<u></u>
		**·
<u> </u>		70 . 1
nter new principal offices address, if applicable:  rincipal office address MUST BE A STREET ADDRESS)  inter new mailing address, if applicable:  Italian address MAY BE A POST OFFICE BOX)		<u>∵</u>
B. If amending the registered agent and/or registered office gent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter t</u>	the name of the new registe
	<del></del> :	
New Registered Office Address:	Enter Florida street address	
	***	
<del></del>	, Flo	rida Zip Code
	City	ing com

## 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	WALL GONZALEZ JOSE MANU	349 SE 20TH AVE. HOMESTEAD FL. 33133	🗆 Add
			\exists Remove
MGR	VICTOR MANUEL WALL	349 SE 20TH AVE. HOMESTEAD FL, 33133	<b>=</b> Add
			□Remove
			□Change
MGR	DANIELA CAMACHO	349 SE 20TH AVE. HOMESTEAD FL, 33133	<b>=</b> Add
			Remove
		349 SE 20TH AVE. HOMESTEAD FL, 33133	□Change
MGR	JOSE ARTURO CAMACHO		<b>=</b> Add
			□ Remove
			Change
<del> </del>			🗆 Add
			□Remove
			□ Change
			□Add
			Remove
			□Change

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Filing Fee: \$25.00