L23000185415

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COVER LETTER

TO:

TO: Registration Se Division of Cor					
CIMA TEC					
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:			
	JAVIER GUZMAN				
		Name of Person			
	CIMA TECH LLC				
Firm/Company					
	5252 NW 85TH AVE APT 1107				
		Address			
	DORAL, FL 33166				
	USTUEMPRESA@GMAII	City/State and Zip Code			
	-	to be used for future annual report noti	tication)		
For further information e	oncerning this matter, please o	all:			
JAVIER GUZMAN		786 340-0372			
Name of Person		at () Area Code Daytim	e Telephone Number		
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	S30,00 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 5 Division of C P.O. Box 632 Tallahassee, 1	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'allahassee e Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CIMA TECH LLC			2022 NEV 0
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on c Liability Company)	urrecords = 9 AH 1: 3;
ne Articles of Organization for this Limited I orida document number <u>L23000185415</u>	Liability Compan		· · ·
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name of	of the limited lial	bility company here:	
Λ			
e new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designa	tion "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		NA	
rincipal office address MUST BE A STRE.	<u>ET ADDRESS)</u>		
nter new mailing address, if applicable: Aailing address MAY BE A POST OFFICE If amending the registered agent and/orgent and/orgent and/or the new registered office addre	registered office	NA address on our record	ls, enter the name of the new registe
Name of New Registered Agent:	IRIS M BRICENO		
New Registered Office Address:	5252 NW 85T	H AVE APT 1107	
	Enter Florida street address		
	DORAL		. Florida 33166 Zip Code
		Ciţv	Zip 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.

Aris Bricano

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	IRIS M BRICENO	5252 NW 85TH AVE APT 1107	■Add
		DORAL, FL 33166	□Remove
			□Change
MGR	JAVIER GUZMAN	5252 NW 85TH AVE APT 1107	🗆 Add
		DORA, FL 33166	≣Remove
			🗆 Change
NA	NA	NA	🗀 Add
			□Remove
			🗀 Change
NA	NA	NA	□Add
			□Remove
			Change
NA	NA	NA	□Add
			□Remove
			□Change
NA	NA	NA	□Add
			□ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NA E. 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 filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed. Dated __ JAVIER GUZMAN Typed or printed name of signee