## 123000189962

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phone	m .
(Oil	ty/Otate/Zip/Filone	<del>"</del> )
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	e)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

		ration Secti on of Corpo			
end ica		MILLION V	OICES LLC		
SUBJEC	: <u></u>		Name of Lim	ited Liability Company	
The encl	osed A	rticles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please re	turn al	l correspond	lence concerning this matter	to the following:	
			Santiago Bolivar Carvajal		
				Name of Person	
				Firm/Company	<del></del>
			253 Northeast 2nd Street,	Apt. 629	
				Address	
			Miami, Florida 33132		
				City/State and Zip Code	
			Santiago. beliva E-mail address:	to be used for Juture annual report notifi	cation)
For furth	ner info	rmation con	scerning this matter, please c	all:	
Santiage	o Boliv	ar Carvajal		at (786 ) 838 24.	36
		Name of P	Person	Area Code Daytime	Telephone Number
Enclosed	d is a cl	neck for the	following amount:		
<b>■ \$25</b> .	.00 Fili	ng fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Contified Copy (additional copy is enclosed)
	Regis Divis P.O.	ng Address: stration Se ion of Cor Box 6327 hassee, FL	retion rporations	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassec, FL.	tion () porations allahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our real Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C Florida document number 1.23000189962	Company were filed on APRIL 17, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
	<del> </del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>er</u>	iter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ldress
	City	, Florida
	Cuỳ.	sqr Coae

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

MILLION VOICES 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
AMBR	Lyncrly Esther Vera Pino	5831 W. Hillsboro Blvd. Apt. 201	
		Coconut Creek, FL 33073	Remove
		******	□ Change
AR	Lynerly Esther Vera Pino	5831 W. Hillsboro Blvd. Apt. 201	Add
		Coconut Creek, FL 33073	Remove
			□ Change
		-	□ Add
			Remove
		<del></del>	Change
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		<del>.</del>	
			□Remove
			□Change

to be a member of Million Voice	es LLC; instead, she has been added as an Auth	orized Representative (AR) of the	
company.			
			<del></del>
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-			<del></del>
	<u> </u>		
			<del></del>
ective date, if other than t	the date of filing:	(optiona	ıl)
e: If the date inserted in this	the date of filing:  must be specific and cannot be prior to date  s block does not meet the applicable s  Department of State's records.		
			~ 1
	ctive date, but not an effective time, a	t 12:01 a.m. on the earlier of: (b)	The 90th day after th
s filed.			:
June 5	2024		( )
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	111 121.		( )

Typed or printed name of signee