## L23000208487

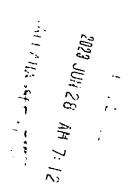
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



000411093310

08/28/23--01018--003 \*\*25.00





## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION : ◀ **OF**

RANDY SANTOS DANCE STUDIO LLC

\$23 JUN 28 AM 7: 12 (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Lim	ited Liability Company) · · · · · · · A;	Maria Caraca
The Articles of Organization for this Limited Liability Comp		
Florida document number L23000208987		
This amendment is submitted to amend the following:		
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	liability company here:	
he new name must be distinguishable and contain the words "Limited l	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Inter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
	fice address on our records, <u>enter th</u>	e name of the new regis
gent and/or the new registered office address here:		ı
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	:
	, Flori	ida Zip Code
	City	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.

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	RANDY SANTOS	7340 SW 48TH STREET # 108B MIAMI, FL 33155	; ■ Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
<del></del>			□ Add
			□Remove
			□Change
			□Add
			□Remove
		:	□Change
			□Add
			□Remove
			🗀 Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□ Change

	ling any other information, enter change(s) here: (Attach additional sheets. if necessary.)	
		<del></del> -
		<del></del>
	<u> </u>	
		<del></del>
		<del></del>
	<u> </u>	
		<del></del>
effecti <u>te:</u> If t	date, if other than the date of filing:	605.020 listed a
cord sp s filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after the
ed	·	
	R. D.	
	Signature of a member or authorized representative of a member	_

## COVER LETTER

TO:

Registration Section
Division of Corporations

RANDY SANTOS DANCE STUDIO LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: RANDY SANTOS Name of Person Firm/Company 7849 MILLER DRIVE UNIT A 109 Address MIAMI, FL 33155 City/State and Zip Code RANDYJOSESANTOS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **RANDY SANTOS** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **■ \$25.00** Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) ★ Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303