L23000219470

(Requestor's Name)
(Address)
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SECRETARY OF STATE

Y. SCOTT SEP 1 0 2023

COVER LETTER

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	gistration So islon of Cor			-			
SUBJECT:	YOYA INT	TERNATIONAL LLC					
30bJECT;		Name of Lin	nited Liability Company		_		
		Amendment and fee(s) are sub	-				
	·	SALVADOR FALCON	g				
			Name of Person				
		YOYA INTERNATIONA	L LLC				
			Firm/Company				
		9749 AMBER CHESTNU	IT WAY		2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	2023	
			Address		广治	NO.	•
		WINTER GARDEN, FL	34787		AHA	2023 AUG 16	
		SFALCONLAIRET@gmai	City/State and Zip Code L.com		SSEE SSEE	PM 3: 32	į
			to be used for future annual report no	tification)	_ 	3: 32	
For further in	iformation c	oncerning this matter, please c	all:		, ,		
ALEJANDR	O GUTIER:	REZ	352 2565533				
	Name o	f Person	at ()Area Code Dayti	me Telephone Num	iber	-	
Enclosed is a	check for th	ne following amount:					
≅ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif	Filing Felicate of Sied Copy on al copy is	tatus &	
Reg Div P.O	iling Addres gistration S vision of C D. Box 632 lahassee, I	Section orporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite	e 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOYA INTERNATIONAL LLC		
(Name of the Limit	ed Liability Company as it now appears on our rec (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited L		and assigned
Florida document number L23000219470	 -	
This amendment is submitted to amend the foll	owing:)
A. If amending name, enter the new name o	f the limited liability company here:	2023
The new name must be distinguishable and contain the v	vords "Limited Liability Company," the designation "l	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	rable:	- F
(Principal office address MUST BE A STREE	ET ADDRESS)	- Se 3
Enter new mailing address, if applicable:		3: 32 F. F. F.
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addre	-	ter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		. Florida
	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 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>	Name	Address	Type of Action
MGR	ALARZA, MARIANA	9749 AMBER CHESTNUT WAY	□Add
		WINTER GARDEN, FL 34787	≣Remove
			□Change
			□Add
		A	2023 NUG 16
			PM 3:32 Remove
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Effective date, if other than the data must be a lift an effective date is listed, the date must be a lift by the date inserted in this blood document's effective date on the Dep	be specific and cannot b ck does not meet the	oe prior to date of fil applicable statute	ing or more than 90 days at			
e record specifies a delayed effective rd is filed.	date, but not an effec	ctive time, at 12:0	l a.m. on the earlier of:	(b) The	90th day a	after the
Dated AUGUST 11	. 2023	·				
Frd Im	ignature of a member of				<u>-</u>	_
, s	signature of a member of	or authorized repres	entative of a member			

Filing Fee: \$25.00