L23000221643

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phonε	e #)
(***	.,	· ·· /
PICK-UP	☐ WAIT	MAIL
(D.	siness Entity Nam	20)
(bu	isiness Enuty ivan	nej
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,	3	

Office Use Only



000416924270

10/13/29--01014--007 **25.00

2023 COT 13 AH 10: 56

A. PARISHANI OCT 2 2 2023

COVER LETTER

TO: **Registration Section Division of Corporations**

PONTIER A	ND OZAETA LLC	• •		
	Name of Limi	ited Liability Company	2023	
d Articles of	Amondment and foo(s) are sub-	mitted for filing	nct I	
a Milicies of 7	vinendment and recis) are sum	intited for fining.	ω	
ı all correspor	ndence concerning this matter	to the following:		
	CARLOS OZAETA		 	!
		Name of Person		
	PONTIER AND OZAETA	LEC		
		Firm/Company		
	15726 SW 72ND STREET			
		Address		
	MIAMI, FLORIDA 33193			
		City/State and Zip Code		
	CARLOS@CLARETPONT	TER.COM		
	E-mail address: ()	to be used for future annual report notif	ication)	
nformation co	oncerning this matter, please ca	all:		
ZAETA		305 388-3008		
Name of	Person	Area Code Daytime	Telephone Number	
a check for th	e following amount:			
Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Copy	
	nformation con ZAETA Name of	Articles of Amendment and fee(s) are sub- in all correspondence concerning this matter CARLOS OZAETA PONTIER AND OZAETA 15726 SW 72ND STREET MIAMI, FLORIDA 33193 CARLOS@CLARETPONT E-mail address: (information concerning this matter, please can ozaeta Name of Person a check for the following amount: Filing Fee \$30.00 Filing Fee &	Name of Limited Liability Company Id Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: CARLOS OZAETA Name of Person	Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. at all correspondence concerning this matter to the following: CARLOS OZAETA Name of Person PONTIER AND OZAETA LLC Firm/Company 15726 SW 72ND STREET Address MIAMI, FLORIDA 33193 City/State and Zip Code CARLOS@CLARETPONTIER.COM E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: DZAETA Name of Person Area Code Day time Telephone Number a check for the following amount: Filing Fee \$555.00 Filing Fee \$ Certificate of Status & Certificate Copy Certificate of Status & Certificate Copy Certificate of Status & Certificate Copy Certificate of Status & Certificate Of Sta

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5053	2023
(
-	_

Zip Code

PONTIER AND OZAETA LLC		$\overline{\omega}$
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our reco orida Limited Liability Company)	rds.) A
The Articles of Organization for this Limited Liabilit	ty Company were filed on 05/04/2023	and assigned
Florida document number L23000221643		
This amendment is submitted to amend the following	z:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or regist agent and/or the new registered office address he		er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		Florida

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.

City

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
AMBR	JANET CAMPOS	15726 SW 72ND STREET	= Add
		MIAMI. FLORIDA 33193	□Remove
			□Change
·			□Add
			□Remove
			□ □ Change
			□Remove □Remove □Change
			□Remove
			□Change
			□Add
			□Remove
			□ Change
	<u> </u>		☐ Add
		46-5-37-12-32-32-32-32-32-32-32-32-32-32-32-32-32	□Remove
			☐ Change

				2023
				ن ت
				34 34
				25 6
				
				
			·····	
ctive date, if other than the officitive date is listed, the date must eg. If the date inserted in this blooment's effective date on the De	ck does not meet the applica	o date of filing or more than ble statutory filing requi	(optional) 90 days after filing.) Pur- rements, this date will	suant to 605,020 not be listed a
ord specifies a delayed effective filed.	date, but not an effective (in	ne, at 12:01 a.m. on the o	earlier of: (b) The 90t	h day after th
	2023		ì ,	

Typed or printed name of signee