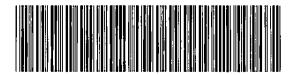
## L23000261655

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



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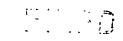
of allelacas

## **COVER LETTER**

TO: Registration Se Division of Cor			
ANGEL F	ALL SOLUTIONS LEC		
SOBJECT:	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:	
	MARCOS R FIGUERAS		
		Name of Person	
	<del></del>	Firm/Company	<del></del>
	7630 SOUTHERN BROO		
		Address	
	TAMPA, FL 33635	City/State and Zip Code	
	marcosrfiguerasg@gmail.co		
		to be used for future annual report	notification)
For further information c	concerning this matter, please e	alt:	
MARCOS R FIGUERA	S GOMEZ	941 284-360: at () Area Code Da	5
Name C	of Person	Area Code Da	time Telephone Number
finclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing fee & Centificate of Status	S55.00 Filing Fee & Certified Copy (auditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address Registration	
Division of C	Corporations	Division of 0	Corporations
P.O. Box 632 Tallahassee,			of Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 AUG 28 AM 9: 06

ANGEL FALL SOLUTIONS LL	•		8
(Name of the Limi	ted Limbility Compa (A Florida Limited t	ny ay it now appears on Liability Company)	our records) TALLA IN SEE, FL
The Articles of Organization for this Limited Elorida document number 1.23000261655			
his amendment is submitted to amend the fol	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
VA.			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	ation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)		7630 SOUTHERN F	BROOK BEND
		APT 103	
	<del>`</del>	TAMPA, FL 33635	
inter new mailing address, if applicable:		7630 SOUTHERN I	BROOK BEND
Mailing address MAY BE A POST OFFICE	BOX)	APT 103	
	<del></del> _	TAMPA, FL 33635	
. If amending the registered agent and/or gent and/or the new registered office addressed and the new registered Agent:	ess here:	address on our recor	ds, <u>enter the name of the new registe</u> i
Name of New Registered Agen.			
New Registered Office Address:	7630 SOUTHF	RN BROOK BEND A	
	7.140.1	i.mer runuus	
	TAMPA	City	, Florida <sup>33635</sup>
Sew Registered Agent's Signature, if changing			Zip Coac

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.

MATCAS P. FIGURAS CONTA-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
AMBR	ALEJANDRA LOPEZ BAEZ	7630 SOUTHERN BROOK BEND APT 103	<b>=</b> Add
		TAMPA, FL 33635	□Remove
			🗀 Add
			□Remove
			Change
		<del></del>	
			□Change
			🗀 Add
			DRemove
			□Change
	<del></del>	<del> </del>	□Add
			!JRemove
			□Change
			DAdd
			□Remove
			[]Change

N/A		
		***************************************
		<del></del>
<del></del>		
		·
liffective date if other than the d	05/29/2023 (optional)	
Note: If the date inserted in this bloc	optional) ate of filing:  (optional) a specific and cannot be prior to date of filing or more than 90 days after filing, a does not meet the applicable statutory filing requirements, this date artment of State's records.	) Pursuant to 605,0207 (3 will not be listed as the
e record specifies a delayed effective ord is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) Th	e 90th day after the
Dated AUGUST 22ND	. 2023	
	MATCAS P. Figuetras Cames guardre of a member of authorized representative of a member	
3	Summer of a monitor of authorized representative of a method	
MARCOS R FIGUERAS		
	Typed or printed name of signee	