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Special Instructions to F	iling Officer:		

Office Use Only



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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

UNA IMM	IGRACION LEGAL & INTEG	GRAL LLC				
SUBJECT:	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:				
	RICARDO JOSE PINZON	LMUSSO				
	_	Name of Person				
		Firm/Company	نت!			
318 N JOHN YOUNG PKWAY SUITE 3						
		Address	<del></del> .			
	KISSIMMEE FL		C.			
		City/State and Zip Code	<del></del>			
	grupolegalconsultoresrp@g		·			
	E-mail address: (	to be used for future annual report not	ification)			
For further information of	oncerning this matter, please c	all:				
RICARDO PINZON		689 2769963				
Name o	f Person	at () Area Code Daytim	ne Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address Registration S	Section	Street Address: Registration Se				
Division of C P.O. Box 632	-	Division of Cou The Centre of T				
Tallahassee, l			oc Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNA IMMIGRACION LEGAL & INTEGRAL L	LC	
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
he Articles of Organization for this Limited Liability Comp	any were filed on JUNE 14	and assigned
lorida document number L23000287120		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
ne new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbrevia	ntion "L.L.C."
nter new principal offices address, if applicable:		,
Principal office address MUST BE A STREET ADDRESS	2	
		<b>1</b> 5
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
num guaress mar bear of the or of the book		: :.:
<ul> <li>If amending the registered agent and/or registered off gent and/or the new registered office address here:</li> </ul>	ice address on our records, <u>enter the name of</u>	the new registe
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street address	
	د استام	
	, Florida	p 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>	<u>Name</u>	Address	Type of Action
MGR	Ricordo José Pinzon Hosso	318 N JOHN YOUNG PKWAY SUITE 3	≘Add
			□Remove
			ClChange
MGR	Elvia Carolina Pinzon Husso	318 N JOHN YOUNG PKWAY SUITE 3	■Add
		<del></del>	□Remove
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in effective di	ite is listed, the	date must be spec a this block doc	cific and ca	annot be pric	or to date of	filing or mo	re than 90 d	ays after fil	ing.) Pursu	ant to 605.020
ote. If the concument's ef	fective date o	n the Departme	ent of Sta	te's record	s.	diory ming	requirent	ins, tins u	ate will in	ot oc fisted as
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Filing Fee: \$25.00