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## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: BAROQ L			
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ZAPATA TOBON, MIGU	ÆL.	
		Name of Person	<del></del>
	BAROQLLC		
		Firm/Company	
	7901 4TH ST. N. STE. 300		
		Address	<del></del> ,
	ST. PETERSBURG, FL 3	3702	
	<del></del>	City/State and Zip Code	
	corporate@onewayoranothe	•	
	E-mail address: (	to be used for future annual report not	dication)
For further information c	oncerning this matter, please c	all:	
Adelina Salas		718 635-1313	
Name o	f Person		e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25,00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
Mailing Address Registration S	_	Street Address: Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 632	7	The Centre of T	
Tallahassee, F	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2024 AUS 23 AM 11:50 BAROQ LLC (Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/03/2023 Florida document number 1.23000315760 This amendment is submitted to amend the following: 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 "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

Cin

, Florida \_\_

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>	<u>Address</u>	Type of Action
	REYES VELEZ, CARLOS ESTEB.	CARRERA 20 # 101-74, AP. 502	□ Add
		BOGOTA DC, BG 11011-1 CO	■Remove
			Change
	ANGELA MARIA TOBON DIAZ	7901 4TH ST. N. STE, 300	<b>=</b> Add
		ST. PETERSBURG, FL 33702	Петюve
			□ Change
	<del></del>	<del></del>	□ Add
			□Remove
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		Clange	

Effective date, if other than the date of filing:  ((If the offsetive date is listed; the date must be specific and comet be prior to date of filing or more than 30 days after filing.) Pursuant to 605.020 More; if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 30th day after the ord is filed.  Dated  Dated  Signature of a member or authorized representative of a member.		
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