

L23000318431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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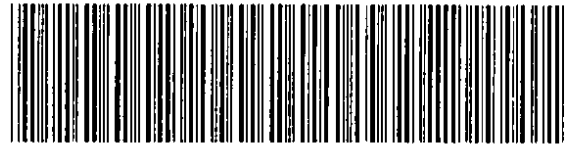
(Business Entity Name)

(Document Number)

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07/18/23--01007--013 **25.00

2023 JUL 18 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

RECEIVED

AUG 16 2023

COVER LETTER

TO: Registration Section
Division of Corporations

Broker To Me LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATIUSKA N RODRIGUEZ

Name of Person

BROKER TO ME LLC

Firm/Company

245 NE 14TH ST APT 3514

Address

MIAMI FLORIDA 33132

City/State and Zip Code

KATY@BROKERTOME.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATIUSKA N RODRIGUEZ

305

988-2626

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration 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**

BROKER TO ME LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

FILED

2023 JUL 18 AM 10:01

The Articles of Organization for this Limited Liability Company were filed on 07-05-2023

Florida document number 1.2300031843

SECRETARY OF STATE
TALLAHASSEE, FL

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BROKER TO ME I.T LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

_____, 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	KATIUSKA NEREIDA RODRIGI	245 NE 14TH ST APT 3514 MIAMI FL 33132	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHRISTOPHER M JARAQUEM.	245 NE 14TH ST APT 3514 MIAMI FLORIDA 33132	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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