L23 000 329 262

(Reque	stor's Name)
(Addres	55)
(Addres	ss)
(City/St	ate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docun	nent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	ng Officer:

Office Use Only

A. RIVERS SEP 1 6 2023



600412801696

09/44/23--01002--019 **25.00

COVER LETTER

TO: Registration S Division of Co			
Adriana M SUBJECT:	orales LLC		
5065EC1.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Adriana Morales		
		Name of Person	
	Adriana Morales LLC		
		Firm/Company	
	5401 Collins Ave Apt 102	9	
		Address	
	Miami Beach, Fl 33140		
		City/State and Zip Code	
	moralesradriana@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Adriana Morales		786 3548473	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he 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)
No. alica a de del care		Samuel Addition	

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

(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 $\frac{07/12/2023}{1}$ and assigned Florida document number L23000329262 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Adriana Morales Ramos 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

New Registered Agent's Signature, if changing Registered Agent:

Adriana Morales LLC

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 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
			□Remove
			Change
			□Add
			Remove
			□Change
			□ Add
			□Remove
			☐ Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Adđ
			□Remove

				····		
	·					
						
			- 			
						
_						
		- · · · · · · · · · · · · · · · · · · ·				
_	 					
						· · · ·
	······································			 		
			<u> </u>			
effecti e: If t	date, if other than the we date is listed, the date must he date inserted in this blows affective date on the De	be specific and cannot does not meet t	he applicable sta	of filing or more than tutory filing requir	(optional) 90 days after filing.) I ements, this date w	Pursuant to 605.020 ill not be listed a
		•				
cord sp filed.	oecifies a delayed effective	date, but not an ef	ffective time, at 1	2:01 a.m. on the e	arlier of: (b) The	90th day after the
ed	- <u>-</u>	·	·			
		Was	4			
			,			
		Signature of a memb	er or authorized re	presentative of a mer	nber	