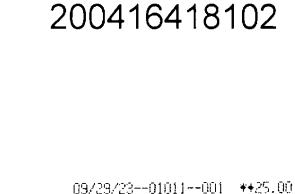
## 123000361498

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer.					





Office Use Only

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## **COVER LETTER**

TO:	Registration So Division of Cor					
611D 1E2		THERE EXISTS LLC				
SUBJECT: Name of Limited Liability Company						
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		JOSE M GUZMAN				
			Name of Person			
FOR ALL THERE EXISTS LLC						
	Firm/Company					
	3737 PEACOCK AVE SUITE 228					
		·	Address	~		
	MIAMI, FL 33146					
			City/State and Zip Code			
		JGUZMANV90@GMAIL.				
		E-mail address: (	to be used for future annual report no	tification)		
For furth	ner information c	oncerning this matter, please c	alt:			
JOSE M	I GUZMAN		305 491-7570			
Name of Person		at () Area Code Daytii	me Telephone Number			
Enclosed	d is a check for t	he following amount:				
<b>\$25</b> .	.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 Section		Street Address: Registration Se	ection			
Division of Corporations			_	Registration Section Division of Corporations		
P.O. Box 6327		The Centre of	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOR ALL THERE EXISTS LLC		
( <u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on AUGUST 1, 2023	and assigned
Florida document number 1.23000361498		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
J.GUZMAN CONSULTING LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADD	RESS)	2 2
		99
Enter new mailing address, if applicable:		2 7
(Mailing address MAY BE A POST OFFICE BOX)		10:
		- Ta
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	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 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
		<del></del>	□ Add
		<del></del>	🗆 Remove
			□Change
			□Add
			□Remove
			🗆 Change
		<del></del>	🗆 Adđ
			□Remove
			□Change
			🗆 Add
			□Remove
			🗆 Change
			□Add
			□Remove
			🗆 Change
			□Add
			Петюче
			□ Changa

Typed or printed name of signee

JOSE M GUZMAN