## L23000395141

| (Requestor's Name)                      |
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## **COVER LETTER**

|                       | GROUPO  | ATLANTICO HOLDINGS LI   | .C                               |  |  |  |
|-----------------------|---|---|----------------------------------|--|--|--|
| SUBJECT               | r:  | Name of Lim   | ited Liability Company           |  |  |  |
| The enclos            | sed Articles of   | Amendment and fee(s) are sub  | omitted for filing.              |  |  |  |
|                       |   |   | -                                |  |  |  |
| r reade rea           | an an emesja  | indence concerning this matter  | to the following.                |  |  |  |
|                       |   | Alexander E. Borell   |                                  |  |  |  |
|                       | Name of Person  Law Offices of Alexander E. Borell  Firm/Company  319 Clematis Street, Suite 200  Address  West Palm Beach, FL 33401  City/State and Zip Code alex@borell.com  E-mail address: (to be used for future annual report notification)  er information concerning this matter, please call:  er E. Borell  Name of Person  Area Code  Daytime Telephone Number  is a check for the following amount:  Of Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  The Centre of Tallahassee |   |                                  |  |  |  |
|                       |   | Law Offices of Alexander  | E. Borell                        |  |  |  |
| Firm/Company          |   |   |                                  |  |  |  |
|                       |   | 319 Clematis Street, Suite 200  |                                  |  |  |  |
|                       |   |   | Address                          |  |  |  |
|                       |   | West Palm Beach, FL 334   |                                  |  |  |  |
|                       |   | DATLANTICO HOLDINGS LLC  Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing, nondence concerning this matter to the following:  Alexander E. Borell  Name of Person  Law Offices of Alexander E. Borell  Firm/Company  319 Clematis Street, Suite 200  Address  West Palm Beach, FL 33401  City/State and Zip Code  alex@borell.com  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  of Person  at ( |                                  |  |  |  |
|                       |   | ~   |                                  |  |  |  |
|                       |   |   |                                  | rification)                            |  |  |
| For further           | information c   | oncerning this matter, please c   | all:                             |  |  |  |
| Alexander             |   |   | 561 855-3445                     |  |  |  |
|                       | Name o  | f Person  | Area Code Daytir                 | ne Telephone Number                    |  |  |
| Enclosed i            | s a check for th  | ne following amount:  |                                  |  |  |  |
| <b>■</b> \$25.00      | ) Filing Fee  |   | Certified Copy                   | Certificate of Status & Certified Copy |  |  |
| Mailing Address:      |   |   | vetion                           |  |  |  |
|                       | -   |   | <del>-</del>                     |  |  |  |
| Р                     | .O. Box 632   | .7  | The Centre of                    | Tallahassee                            |  |  |
| Tallahassee, FL 32314 |   |   | 2415 N. Monroe Street, Suite 810 |  |  |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GROUPO ATLANTICO HOLDINGS LLC  |   |                                   |
|--|---|-----------------------------------|
| (Name of the Limited Liability Com<br>(A Florida Limite  | pany as it now appears on our reco<br>d Liability Company)  | ords.)                            |
|  | ny were filed on <u>08/22/2023</u>  | and assigned                      |
| 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."  Inter new principal offices address, if applicable:  Inter new mailing address MUST BE A STREET ADDRESS)  The ster new mailing address, if applicable:  Inter new mailing address, if applicable:  Inter new mailing address, if applicable:  Inter new mailing address MAY BE A POST OFFICE BOX)   |   |                                   |
| he Articles of Organization for this Limited Liability Company were filed on one of the limited liability Company were filed on one of the limited liability company here:  It amending name, enter the new name of the limited liability company here:  It amending name, enter the new name of the limited liability Company," the designation "LLC" or the abbreviation "LLC" and the new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  It amending address, if applicable:  Pailling address MAY BE A POST OFFICE BOX)  It amending the registered agent and/or registered office address on our records, enter the name of the field registered address here:  Name of New Registered Agent: |   |                                   |
| he new name must be distinguishable and contain the words "Limited Lia   | bility Company," the designation "L   | J.C" or the abbreviation "L.L.C." |
| Inter new principal offices address, if applicable:  |   |                                   |
| Principal office address MUST BE A STREET ADDRESS)   |   | ~1                                |
|  |   | 2023                              |
|  |   | HASE 33                           |
| nter new mailing address, if applicable:   |   | C - 4                             |
| •  | becument number  L23000395141  Indiment is submitted to amend the following:  conding name, enter the new name of the limited liability company here:  In the must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC we principal offices address, if applicable:  In office address MUST BE A STREET ADDRESS)  We mailing address, if applicable:  In address MAY BE A POST OFFICE BOX)  In the new registered agent and/or registered office address on our records, enter the name of the few of the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address | m ·                               |
| Junior dual Constitution of the Design   | -   |                                   |
|  |   | <del></del>                       |
| <ol> <li>If amending the registered agent and/or registered office<br/>gent and/or the new registered office address here:</li> </ol>  | e address on our records, <u>ent</u>  | er the name of the few registe    |
| Name of New Registered Agent:  |   |                                   |
| New Registered Office Address:   |   |                                   |
|  | Enter Florida street add  | lress                             |
|  |   | 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>        | Address                           | Type of Action                    |
|--------------|--------------------|-----------------------------------|-----------------------------------|
| MGRM         | Castellanos, Efran | 2104 SW 93 Court, Miami, FL 33165 | ≣Add                              |
|              |                    |                                   | □Remove                           |
|              |                    |                                   | □Change                           |
| MGR          | Castellanos, Maria | 2104 SW 93 Court, Miami, FL 33165 | <b>=</b> Add                      |
|              |                    |                                   | □Remove                           |
|              |                    |                                   | □Change                           |
| MGR          | Castellanos, Pedro | 2104 SW 93 Court, Miami, FL 33165 |                                   |
| <del></del>  |                    |                                   | □Remove                           |
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| ffective date, if other than the date of filing:   | (option                                     | nal)                             |                             |
| an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicab | date of filing or more than 90 days after t | iling.) Pursuan<br>date will not | t to 605,029<br>he listed : |
| ocument's effective date on the Department of State's records.   | ,g  |                                  | oo mercu i                  |
|  |   |                                  |                             |
| record specifies a delayed effective date, but not an effective tim<br>Lis filed.  | e, at 12:01 a.m. on the earlier of: (b)     | The 90th da                      | y after th                  |
|  |   |                                  |                             |
| ated   |   |                                  |                             |
|  |   |                                  |                             |
| Signature of a member or authori   |   |                                  | _                           |
| D Signature of a member of anthori   | zeu representative of a member              |                                  |                             |

Filing Fee: \$25.00