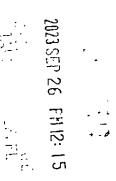
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

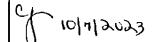


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Office Use Only



## **COVER LETTER**

Division of Cor		•	•
2010 1&J 1.	1.C		
SUBJEČT:	None of the	ited Liability Company	
	Name of Lin	ited Clability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	FERNANDO GIL		
		Name of Person	
		Firm/Company	
	11140 NW 71 ST		
		Address	_
	MIAMI, FL 33178		
	GRUPOGUECARLLC@G	City/State and Zip Code MAIL.COM	
	E-mail address: (	to be used for future annual report	notification)
For further information c	oncerning this matter, please c	all:	
FERNANDO GIL		305 3020344	
Name o	f Person	at () Area Code Day	time Telephone Number
Inclosed 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)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	s:	Street Address	
Registration Section		Registration	Section
Division of C		Division of C	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2010 J&J LLC

2023 SEP 26 PH 12: 15

	2010 303 6	LC	50 11115:12
(Name of the Lim	ited Liability Comp	any as it now appears on our reco Liability Company)	<u>rds.</u> )
	(A Florida Limited	Liability Company)	一点 经通过
The Articles of Organization for this Limited I	iability Company	v were filed on	and assigned
lorida document number 1.23000403546	·		
his amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name o</u>	of the limited liab	bility company here:	
he new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREET ADDRESS)		N/A	
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or	registered affice	address on our rocords ente	or the name of the new regis
gent and/or the new registered office addre	Ç.,	address on our records, end	or the name of the new regis
	N/A		
Name of New Registered Agent:			
New Registered Office Address:	N/A 		
	SUA	Enter Florida street addr	ress
	N/A		FloridaZip Code
		Cuy	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>	<u>Name</u>	Address	Type of Action
AMBR	FERNANDO GIL INTERNATION	3411 SILVERSIDE RD TATNALL BLDG 104 WILMINGTON, DE 19810	<b>=</b> Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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	09/20/2023
(If an eft Note:	re date, if other than the date of filing:
the recor	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
	EPTEMBER, 19 2023
Dated	<u></u>

Typed or printed name of signee