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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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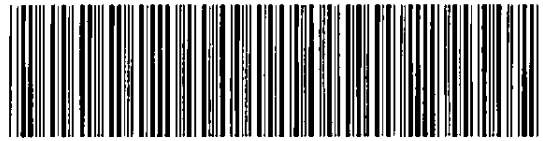
(Business Entity Name)

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FALL ADMINISTRATIVE SESSION

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** JOAQUINA BLAVIA LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOAQUINA BLAVIA

\_\_\_\_\_  
Name of Person

Joaquina Blavia LL.C.

\_\_\_\_\_  
Firm/Company

723 CRANDON BLVD. APT 305

\_\_\_\_\_  
Address

KEY BISCAYNE, FL. 33149

\_\_\_\_\_  
City/State and Zip Code

joquinablavia@gmail.com

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

For further information concerning this matter, please call:

Joaquina Blavia

305 4953915

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**

JOAQUINA BLAVIA LLC

(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 OCTOBER 02, 2023 and assigned Florida document number 123000452850.

This amendment is submitted to amend the following:

**A. 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 "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>
AMBR	FRANCISCO BLAVIA	723 CRANDON BLVD	<input checked="" type="checkbox"/> Add
		APT 305	<input type="checkbox"/> Remove
		KEY BISCAYNE, FL, 33149	<input type="checkbox"/> Change
AMBR	CAMILA CANABAL	723 CRANDON BLVD	<input checked="" type="checkbox"/> Add
		APT 305	<input type="checkbox"/> Remove
		KEY BISCAYNE, FL, 33149	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change



## **ASSIGNMENT OF MEMBERSHIP INTEREST**

**This Assignment of Membership Interest** (the "Assignment") is made and entered into as of July 3rd, 2024 (the "Effective Date"), by and between Joaquina Blavia (the "Assignor"), and Francisco Blavia and Camila Canabal (collectively, the "Assignees").

**WHEREAS**, Joaquina Blavia LL.C., a Florida limited liability company (the "Company"), is owned by Assignor.

**WHEREAS**, Assignor desires to assign and transfer ten percent (10%) of her membership interest in the Company to Francisco Blavia and ten percent (10%) of her membership interest in the Company to Camila Canabal (collectively, the "Assigned Interest");

**NOW, THEREFORE**, in consideration of the mutual promises and covenants contained herein, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

### **1. Assignment and Acceptance**

1.1. **Assignment.** Assignor hereby assigns, transfers, and conveys to Francisco Blavia and Camila Canabal, and Assignees hereby accept from Assignor, the Assigned Interest, effective as of the Effective Date.

1.2. **Percentage Interest.** Assignor transfers ten percent (10%) of her membership interest in the Company to Francisco Blavia and ten percent (10%) of her membership interest in the Company to Camila Canabal.

### **2. Representations and Warranties of Assignor**

2.1. **Authority.** Assignor represents and warrants that she is the sole owner of the Assigned Interest, has the full legal right, power, and authority to assign the Assigned Interest, and that no consent, approval, or authorization of any third party is required for the assignment of the Assigned Interest.

2.2. **No Encumbrances.** Assignor represents and warrants that the

Assigned Interest is free and clear of any liens, claims, encumbrances, or restrictions.

### 3. **Assumption of Liabilities**

3.1. **Assumption by Assignees.** From and after the Effective Date, Assignees shall assume and be responsible for any and all taxes, liabilities, and obligations attributable to the Assigned Interest.

### 4. **Entire Agreement**

4.1. **Entire Agreement.** This Assignment represents the entire understanding and agreement between the parties concerning the subject matter hereof and supersedes any and all prior or contemporaneous negotiations, understandings, and agreements, whether written or oral, between the parties.

4.2. **Amendments.** Any modification, amendment, or waiver of any of the provisions of this Assignment shall be effective only if made in writing and signed by both Assignor and Assignees.

### 5. **Contact Information and Notifications**

Assignor:

Joaquina Blavia

Email: [joaquinablavia@gmail.com](mailto:joaquinablavia@gmail.com)

Phone: 3054953915

Assignees:

Francisco Blavia

Email: [fblavia@gmail.com](mailto:fblavia@gmail.com)

Phone: 3059232381

Camila Canabal

Email: [camilacanabal@gmail.com](mailto:camilacanabal@gmail.com)


Phone: 3059232363

### 6. **Governing Law**

5.1. **Governing Law.** This Assignment shall be governed by and construed in accordance with the laws of the State of Florida, without regard to its conflicts of law principles.


**IN WITNESS WHEREOF**, the parties have executed this Assignment as of the Effective Date.

**ASSIGNOR:**


  
Joaquina Blavia (1 ago.. 2024 15:46 EDT)

Joaquina Blavia

**ASSIGNEES:**


  
Francisco Blavia (18 jul.. 2024 16:38 CDT)

Francisco Blavia

  
Camila Canabal (22 jul.. 2024 19:58 EDT)

Camila Canabal

**JOAQUINA BLAVIA LL.C.:**

  
Joaquina Blavia (1 ago.. 2024 15:46 EDT)

Joaquina Blavia, Sole Member