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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000426455 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MAC CPA LAW Account Number : I20220000137 : (787)433-7373 : (787)433-7373 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CASPRI OUTSOURCING LLC

Certificate of Status	0
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T. LEMIEUX JAN 1 1 2024

## **COVER LETTER**

H23000426455 3)

TO: Registration S Division of Co		•
CURINCE	CASPRI OUTSOURCE	NG LLC
SUBJECT:	Name of Lim	ited Liability Company
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.
Picase return all correspondent	ondence concerning this matter	to the following:
	MARIA	J CAPRILES GARCIA
		Name of Person
	CA	SPRI OUTSOURCING LLC
		Firm/Company
	215 E	CYPRESS ST
	<del> </del>	Address
	0.5	N. V.D.C. 75. 22224
	OR	City/State and Zip Code
	E-mail address: (	to be used for future annual report notification)
For further information of	concerning this matter, please c	•
MARIA J CA	APRILES	at (407)
Name o	of Person	Area Code Daytime 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:
Registration		Registration Section
Division of C		Division of Corporations

P.O. Box 6327 Tailahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H230004264553)

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company were filed on	10/24/2023	and assigned
lorida document number <u>L23000487035</u>		
his amendment is submitted to amend the following:		
L. If amending name, enter the new name of the limited liability company he	<u>re</u> :	
he new name must be distinguishable and contain the words "Limited Liability Company," the de	esignation "LLC" or the ab	breviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<del></del>	
<del></del>		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
THE TOTAL COLUMN TO THE POINT OF THE POINT O		
If amending the registered agent and/or registered office address on our regent and/or the new registered office address here:	cords, enter the nam	
	3.	دوي حو
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		- -
	da street address	. =
	, Florida	72:
		Zip Code 2
City  Sew Registered Agent's Signature, if changing Registered Agent:		

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 H23000426455 3) AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MARIAN CAPRILES GARCIA	215 E CYPRESS ST	
		ORLANDO,FL 32824	□Remove
			☐ Change
		<del></del>	□ Add
			□Remove
			☐ Change
			□ Add
			□Remove
		<del></del>	□Remove
			Change
			🗆 Add
		<del></del>	□ Remove
			Change
		<del></del>	□Remove
			□ Change

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fan effectiv Note: If ti	ne date inserted in	late must be specific this block does n	e and cannot be price of meet the appli	cable statutory fi	(op r more than 90 days af ling requirements, t	his date will not be	605.0207 listed as
ocament		effective date, but	not an effective	time, at 12:01 a.r	n. on the earlier of:	(b) The 90th day	after the
record sp	ecifies a delayed e						
	ecifies a delayed e			·			
record sp d is filed.					-		

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