L230005085 /3

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
•	
(Document Number)	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	





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12/04/23--01027--002 ++25.00

SECRETARY OF STATE





November 28, 2023

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE: LLC Amendment - Filing

To Whom it May Concern:

Please find the following enclosed:

- Check #6053 in the amount \$25.00 payable to Florida Department of State for Filing Fee LLC Amendment – 01528 Caliral LLC
- Cover Letter
- Articles of Amendment to Articles of Organization of Caliral LLC

If you have any questions, please contact Christopher Cona at 239-234-6822

Sincerely.

Regen Cana

Legal Assistant to Christopher Cona, Esq., MBA

admin@cona.law

COVER LETTER

Division of Co			
SUBJECT:		CALIFAL L	
	Name of Lim	ited Liability Company	
The englosed Articles of	Amendment and fee(s) are sub	omitted for filing	
		-	
rrease return an correspo	ondence concerning this matter	to the following:	
		Name of Person	
		ona Lan PULL	,
		Firm/Company	
	3165	Ailpit foul, 10	He 2 U/
		MANIE, Plu 7410) City/State and Zip Code	
	,	Citf/State and Zip Code	1.
	E-mail address: (TIDIMA CATT NE	ication)
For further information of	oncerning this matter, please c		
(h)	ii (ana	at (<u>279</u>) <u>274</u> -6 Area Code Daytime	812
Name o	i Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	-		
S25.00 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)
		Street Address:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAL	iral bll
(<u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number <u>L23000508513</u> . This amendment is submitted to amend the following:	npany were filed on $\frac{11/8/23}{}$ and assigned
-	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	d 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 ADDRES	SS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the name of those w registered
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 A	Agent:
provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	d agree to act in this capacity. I further agree to comply with the aplete performance of my duties, and I am familiar with and not as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability
I	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

Title	<u>Name</u>	Address	Type of Action
BMBR	CAILO MARTINEZ	2148 picuadilly circus	🗆 Add
		Naple, Fla 34112	Aemove
			□Change
AMBR	Losi MANTINEZ	2148 Poccadilly Circis	□Add
		NAMES, Plu 74112	Remove
			□Change
MHR	CAILUS MANTINEZ	2148 Piccadilly CILL	iXAdd
		Apple), fla 34112	□Remove
			□Change
MbR	Wii MAItiNez	2148 Picentilly Circus	Add
		Naples, fla 34112	🗆 Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change

If amendi	ing any other inform:	ition, enter change(s)	here: (Attach addition	ial sheets, if necess	ary.) =	
				 		
						
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				·	2023 DEC SECKET	-· -, -
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Han effectiv		st be specific and cannot be	prior to date of filing or mor		ng.) Pursuant to 605.02	
		lock does not meet the a Department of State's rec	pplicable statutory filing ords.	requirements, this di	ate will not be listed a	as the
	ecifies a delayed effecti	ve date, but not an effect	ive time, at 12:01 a.m. or	the earlier of: (b)	The 90th day after th	e
ord is filed.						
Dated	Mounte	22 207	.3			
	, - · , - ·	22 . 207		/		
			authorized representative o	f a member		
					,	
		(hris	printed name of signee	<u>N - 0141118</u>		

Filing Fee: \$25.00