## L23000558491

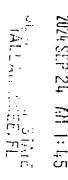
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer:





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09/24/24--01020--001 \*\*25.00





## **COVER LETTER**

	OVO FUNDS	SLLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
		Guillermo Pucheta			
			Name of Person		<del>19 - 9</del> -
		Name of Person  OVO FUNDS LLC  Firm/Company  20900 NE 30th Ave Suite 800  Address  Aventura, FL 33180  City/State and Zip Code gpucheta@officeone.com  E-mail address: (to be used for future annual report notification)  rmation concerning this matter, please call:  teta    Area Code   T86-674-3115   T86-674-3115     Name of Person   Area Code   Daytime Telephone Number			
			Firm/Company		<del> </del>
		20900 NE 30th Ave Suite 8	800		
		_	Address		
		Aventura, FL 33180			
		-	City/State and Zip Code		
		<del></del>		······································	
		E-mail address: (i	to be used for future annual	l report notification	1)
For further in	nformation con	ncerning this matter, please ca	all:		
Guillermo P	ucheta			86-674-3115	
	Name of I	Person Person		Daytime Telep	phone Number
Enclosed is a	i check for the	following amount:			
<b>■</b> \$25.00 F	Filing Fee		Certified Copy		Certificate of Status & Certified Copy
<u>Ma</u>	iling Address:		Street A	.ddress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

OVO FUNDS LLC		· · · · · · · · · · · · · · · · · · ·
( <u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	2021
,,	out thinked that they company	2024 SEP 24
The Articles of Organization for this Limited Liability	Company were filed on 12/20/2023	and assigned
Florida document number 1.23000558491	·	and assigned IALLAHASS
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records, <u>enter th</u> :	e name of the new registered
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	. Flori	da
	City	Zin 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	e 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
AMBR	PATRICIO COLLASSO	20900 NE 30 AVE SUITE 800	
		AVENTURA, FL 33180	□Remove
			<b>■</b> Change
AMBR	JUAN LALFONSO	20900 NE 30 AVE SUITE 800	□Add
		AVENTURA, FL 33180	
		-	<b></b> Change
			□Remove
			□Change
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Commission down is nahousahousahousah	09/19/2024	
	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to does not meet the applicable statutory filing requirements, this date will not be	
e record specifies a delayed effective dard is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after the
Dated SEPTEMBER 19	2024	
llku.d		_
	nature of a member or authorized representative of a member	
GUILLERMO PUCHETA		
	Typed or printed name of signee	_