## 124000037101

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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FILED 2024 AUG -2 AM 9: 1



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11! 2024

FAVIAN ÁLEJANDRO CASTRO 4745 SW|2ND ST MIAMI, FL 33134 US

SUBJECT: F.A.C CLOSING SERVICES LLC

Ref. Number: L24000037101

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering!

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245+6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 224A00005219

## **COVER LETTER**

F.A.C Closing Services LLC				
	Name of Limi	ted Liability Company		
d Articlescot	Amendment and fee(s) are sub-	nitted for filing		
,	Favian Alejandro Castro			
		Name of Person	<del></del>	
	Favian Alejandro Castro F	LLC		
Firm/Company				
	4745 sw 2nd ST			
		Address		
l	Miami/florida 33134			
	City/State and Zip Code			
	mrcastro911@icloud.com	.,,		
		·	tification)	
ntormation co	oncerning this matter, please ca	ill:		
andro Castro		786 382-1882		
Name of	Person	Area Code Daytii	ne Telephone Number	
a check for th	te following amount:			
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: Registration So	ection	
vision of C	orporations	Division of Corporations		
1				
	F.A.C Closi  I Articlestor a all correspondent of Castro  Name of Achee gistration Services of Co. Box 632	Name of Limi  I Articlesiof Amendment and fee(s) are substant all correspondence concerning this matter of all correspondence concerning this matter of all correspondence concerning this matter of a favian Alejandro Castro  Favian Alejandro Castro  Favian Alejandro Castro  Miami/florida 33134  Imreastro911@icloud.com  E-mail address: (information concerning this matter, please canadro Castro  Name of Person  a check for the following amount:  Filing Fee   \$30.00 Filing Fee &	Same of Corporations	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2024 AUG -2 AM 9: 15

F.A.C Closing Services LLC		SEPARAN SESTAIS
(Name of the Limited Liability Con (A Florida Limite	ipany as it now appears on ou ed Liability Company)	ur records:)
The Articles of Organization for this Limited Liability Compa Florida document number L24000037101	ny were filed on $\frac{1/29/2024}{1}$	4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Favian Alejandro Castro PLLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designat	tion "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 offic agent and/or the new registered office address here:	ce address on our record	s, enter the name of the new registo
1		
Name of New Registered Agent:		
New Registered Office Address:		·
I	Enter Florida stre	eet address
		, Florida
†	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	— igree to act in this capac ete performance of my du is provided for in Chapto	uties, and I am familiar with and er 605, F.S. Or, if this document is
·	hanging Registered Agent, <u>Si</u>	gnature 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 = AMBR =	Manager Authorized Member			
<u>Title</u>	<u>Name</u>	<u>A</u> (	<u>ddress</u>	Type of Action
			=	□Add
		_		□Remove
		_		
				□Add
			· · · · · · · · · · · · · · · · · · ·	□Remove
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Effect	e date, if other than the date of filing:
(If an ef Note:	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	n's effective date on the Department of State's records.
	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
ord is fi	i. · · · · · ·
Dated	<u> </u>
	Signature of a member or authorized representative of a member
	Favian Alejandro Castro

Filing Fee: \$25.00