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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Co	rporations			
	OURCES LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JOSE ALEJANDRO MA	ITA		
		Name of Person		
	F&A RESOURCES LLC			
		Firm/Company		
	21381 SAN SIMEON WA	NY APT 102		
	<del></del>	Address		
	MIAMI, FLORIDA 33179	9		
	<del></del>	City/State and Zip Code	<del></del> -	
	alejomuscis@gmail.com	,		
	E-mail address: (	to be used for luture annual i	report notification)	
For further information c	oncerning this matter, please c	all:		
JOSE ALEJANDRO MA	AITA	407 534 at ()	14594	
Name o	f Person		Daytime Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate osed) Certified (	e of Status &
Mailing Addres		Street Ad		
Registration S  Division of C		<del>-</del>	ition Section	
P.O. Box 632			n of Corporations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F&A RESOURCES LLC	<u> </u>	
( <u>Name of the Limited Liability</u> (A Florida Li	company as it now appears on imited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Con	npany were filed on Februar	ry 21, 2024 and assigned
Florida document number L24000091528	· ·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limite</u>	d liability company here:	
N/A		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRES	SS) N/A	.; 2
	N/A	
	-	1- 1 -
Enter new mailing address, if applicable:	N/A	ω
Mailing address MAY BE A POST OFFICE BOX)	N/A	
	N/A	2
		· ·
3. If amending the registered agent and/or registered or gent and/or the new registered office address here:	ffice address on our record	ls, enter the name of the new regis
Name of New Registered Agent: ROSEMA	ARY RODRIGUEZ	
New Registered Office Address:		
	Enter Florida sti	eet address
MIAMI		Florida 33179

## 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.

City

f Changing Registered Agent, Signature of New Registered Agent

Zip Code

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	ROSEMARY RODRIGUEZ	1935 BERGEN ST APT 6 BROOKLYN, NY 11233	≣Add
		N/A	□Remove
		N/A	□Change
N/A N/A	N/A	N/A	□Add
		N/A	
		N/A	_
N/A N/A	N/A	N/A	_ □Add
		N/A	□Remove
		N/A	_
N/A N/A	N/A	N/A	□ Add
		N/A	_ □Remove
		N/A	_ □Change
N/A N/A	N/A	N/A	_ Denange
		N/A	_ □Remove
		N/A	
N/A N/A	N/A	N/A	_ Change
		N/A	_ □Add
		N/A	_ □Remove
			_ Change

	N/A
•	
•	
Effect	05/29/2024 ive date, if other than the date of filing:(optional)
f an ef	fective 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 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ent's effective date on the Department of State's records.
record is fi	d 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 led.
	-01-2
Dated	08/22 3024
	$AW \setminus D$
	/ NI 1.T

Typed or printed name of signee



