

L24 000 119 373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

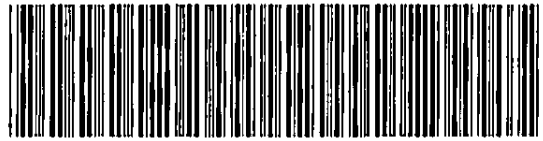
(Business Entity Name)

(Document Number)

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24 JUL 30 AM 5:45
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AGENCIA SELINGER LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRES DUARTE
Name of Person
AGENCIA SELINGER LLC
Firm/Company
956 5TH AVE APT 14-B
Address
NEW YORK , NY 10075
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENDA PENA 954 540-5746
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

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**

AGENCIA SELINGER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MARCH 08 2024 and assigned
Florida document number 1.24000119373.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

City **Florida** *Zip 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 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

[illegible]

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY, 19 2024

BRENDA PENA

Filing Fee: \$25.00

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L24000119373
FILED 8:00 AM
March 08, 2024
Sec. Of State
adjohnson

Article I

The name of the Limited Liability Company is:

AGENCIA SELINGER LLC

Article II

The street address of the principal office of the Limited Liability Company is:

956 5TH AVE
APT 14-B
NEW YORK, NY, US 10075

The mailing address of the Limited Liability Company is:

956 5TH AVE
APT 14-B
NEW YORK, NY, US 10075

Article III

The name and Florida street address of the registered agent is:

BRENDA J PENA
3170 CORAL WAY
SUITE 1101
MIAMI FL 33145

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: BRENDA J PENA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMGR
ANDRES DUARTE
956 5TH AVE APT 14-B
NEW YORK, NY. 10075 US

Title: MBR
BRENDA J PENA
3170 CORAL WAY SUITE 1101
MIAMI, FL. 33145 US

L24000119373
FILED 8:00 AM
March 08, 2024
Sec. Of State
adjohnson

Article V

The effective date for this Limited Liability Company shall be:

03/08/2024

Signature of member or an authorized representative

Electronic Signature: ANDRES DUARTE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.