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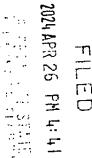
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

	istration Se sion of Cor			
cubirer.		E BEST PRICE LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	ali correspo	ndence concerning this matter	to the following:	
			Name of Person	
		Luis A Valdes Arias		
		·	Firm/Company	
			Address	
		55 NE 5TH ST APT 1927	·	
		Miami,FL,33132	City/State and Zip Code	
			to be used for future annual report n	otilication)
For further in	dormation co	oncerning this matter, please c	all:	
thebestprice666@gmail.com			305 7936219	
	Name o	f Person	Area Code Day1	ime Telephone Number
Enclosed is a	check for th	ne following amount:		
.□ X \$25.00 F		□ \$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)
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations		
P.C). Box 632 Iahassee, l	.7	The Centre of	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

AK	RTICLES OF AMENI TO	DMENT IZATION Vappears on our records.)
ART	TICLES OF ORGAN	IZATION
	OF	19. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
ARIAS THE BEST PRICE	rited Liability Company as it now	v annears on our records)
(Lance of the land	nited Liability Company as it now (A Florida Limited Liability Con	npany)
The Articles of Organization for this Limited L	Liability Company were filed	on 03/11/24 and assigned
Florida document number <u>L24000122846</u>		
This amendment is submitted to amend the fol	Mowine:	
•		,
A. If amending name, enter the new name of	of the limited liability comp	pany here:
The game and the distinguishable and contain the	words "Limited Lishiling Co-	y," the designation "LLC" or the abbreviation "L.L.C."
		y, me designation ble of the abbreviation b.b.c.
Enter new principal offices address, if appli		
(Principal office address MUST BE A STRE.	<u>:ET ADDRESS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	E BOA	
		
		n our records, enter the name of the new registere
agent and/or the new registered office address	<u>ress here</u> :	
	Luis A Valdes Arias	
Name of Name Designated Assets		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	SENIE SELLOW A DELLOSS	,
Name of New Registered Agent: New Registered Office Address:	55 NE 5TH ST APT 1927	
	Ε	Enter Florida street address
New Registered Office Address:	Miami, City	Enter Florida street address
New Registered Office Address: New Registered Agent's Signature, if changing	Miami, City Registered Agent:	Enter Florida street address

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>; <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Luis A Valdes Arias	55 NE 5TH ST APT 1927 Miami, FL, 33132	\ Add
		. ————————————————————————————————————	□Remove
			□Change
MGR	Rebeca Sanjurjo Milan	55 NE 5TH ST APT 1927 Miami, FL, 33132	□Add
		·	■Remove
		· 	□Change
	· -		🗆 Add
			□Remove
			□Change
			DAdd
		·	□Remove
			□Change
			🗆 Add
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ote: If the	te, if other than th ate is listed, the date m date inserted in this b ffective date on the I	block does not r	neet the applic	able statutory film	(o nore than 90 days a ng requirements,	ptional) after filing.) Pursuant (this date will not b	o 605.020 e listed a
record spec Lis filed.	ities a delayed effecti	ve date, but no	t an effective ti	me, at 12:01 a.m	n the earler of	î (b) The 90th day	after the
ated APRI	L-11-2024		·				

. Filing Fee: \$25.00