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## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

SUBJECT:	A & J EXO	TICS BIRDS OF MIAMI	LLC	•
SOBJECT.	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		JADIR HERNANDEZ		
		Name of Person		
	A & J E	KOTICS BIRDS OF MIA	MI. LLC	
Firm/Company				<del></del>
415 SW 91st Ave				
Address				
		MIAMI, FL 33174		
		City/State and Zip Code	•	
		jadir@hispanicfactor.o	•	
	E-mail address: (	to be used for future annual	report notification)	
For further information c	oncerning this matter, please c	all:		
Jadir Hernandez		305 at ()	610 1479	
Name o	f Person	Area Code	Daytime Telephone	Number
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end	closed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Mailing Address Registration S		<u>Street A</u> Registr	ddress: ation Section	
Division of C	orporations	Divisio	n of Corporations	
P.O. Box 632	. /	The Ce	ntre of Tallahasse	e

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021, APR 26 PH 4:44

ds.)

A & J EXOTICS BIRDS OF MIAMI, 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 Lia Florida document number	-	03/12/2024	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of	f amending name, enter the new name of the limited liability company here:  ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  r new principal offices address, if applicable:    Company   Comp		
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the des	ignation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
	gistered office address on our rec		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florid	a street address	
		Florida	Zip Code
	·		Zip Code
New Registered Agent's Signature, if changing Ro			
I hereby accept the appointment as registered provisions of all statutes relative to the prope- accept the obligations of my position as regist being filed to merely reflect a change in the re- company has been notified in writing of this c	r and complete performance of n tered agent as provided for in Ch egistered office address, I hereby	y duties, and I am apter 605, F.S. Or, confirm that the li	familiar with and , if this document is

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	TERESA E. ESPINOZA	415 SW 91st Ave	<b>≡</b> Add
		MIAMI, FL 33174	□Remove
			[]Change
		<del> </del>	□Remove
			□Change
· 			□Add
			□Remove
			□Change
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			□Remove
			□Change

N/A			nge(s) here:		· •	<u>-</u> /	
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fan effecti <del>Note:</del> - If t	date, if other than the d we date is listed, the date must be the date inserted in this block is effective date on the Dep	e specific and car k does not mee	t the applicable	ate of filing or more statutory filing	e than 90 days after	onal) r filing.) Pursuant to s date will not be	605.0207 ( listed as t
record sp d is filed.	occifies a delayed effective	late, but not an	effective time	, at 12:01 a.m. on	the earlier of: (b	o) The 90th day a	fter the
ated	April 21		2024				
	S	gnature of a men	nber of authorize	ed representative of	f a member		

Filing Fee: \$25.00