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COVER LETTER

	COVENCETTER	
TO: Registration Section Division of Corporations	•	
SUBJECT: Laureta H Name of 1	united Liability Company	
The enclosed Articles of Amendment and fee(s) are s	ubuntted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Betsy ha	Name of Person	unguez
	Firm Company	
1120 Rus	Amore ave v	/
lehigh C	ices FL 330	136
Betsy Gare	City State and Zip Code COS1204@Swa. To be used for future annual Sport north	1.0m
For further information concerning this matter, please	call:	
Bety Laura Carca Dor	ringer 39, 744. Distinct	9830 Telephone Number
Enclosed is a check for the following amount:		
V\$25,00 Filing Fee ☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Lee & Certified Copy Gddinonal copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:	
Registration Section	Registration Sec	

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

(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 <u>L24000</u>	ability Company were filed on 03 14 2024 and assigned 0.139232
This amendment is submitted to amend the follow	
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>20X)</u>
B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> here:
Name of New Registered Agent: New Registered Office Address:	Betsy Lawa Garcia Dominguez 1120 RUSHMONE are V Enter Hands Decetaldo Lehigh ares Florida 33936
New Registered Agent's Signature, if changing Re	egistered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther 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.

lf Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>l itte</u>	Name	Address	Type of Action
AMBR	Betylourabarcia	1120 Rish More and	√ _√dd
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f amending any oth My <u>ix</u> 1 Mod	er information, ento 2008 IS Se The U	er change(s) here: Bety f -C and	: Auach addu OU YO M	gional sheets, it not gave a	nhoning Woming whoming we a
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an effective date is listed ote: If the date insert	er than the date of fi f, the date must be specific ted in this block does it ate on the Department	and cunnot be prior to of meet the applical	o date of filing or oble statutory (ih	nore than 90 days afte	ional) (tiling.) Persuant (0 605,020 is date will not be listed a
record specifies a dela Els filed.	ayed effective date, but	not an effective tin	ne, at 12:01 a.m	on the earlier of (b). The 90th day after the
ared <u>04- 2</u>	7-3024 Signature of	Ta mesheu y author	zed representativ	e of a member	
Bet	sy law	Corporation of the control of the co	name of signer	Oming	<u>دع</u>

Filing Fee: \$25.00