L24000178649

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COVER LETTER

Division of	Corporations
JPIXEL SUBJECT:	LAT LLC
	Name of Limited Liability Company
he enclosed Articles	s of Amendment and fee(s) are submitted for filing.
lease return all corre	espondence concerning this matter to the following:
	MARIA A REVOLLEDO
	Name of Person
	JPIXELAT LLC
	Firm/Company
	3030 REEDY CREEK BLVD, APT J210
	Address
	KISSIMMEE, FLORIDA
	City/State and Zip Code
	JPIXELAT@GMAIL.COM
For further information	E-mail address: (to be used for future annual report notification) on concerning this matter, please call:
JUAN ARIAS	6892784260
Nar	ne of Person Area Code Daytime Telephone Number
Enclosed is a check f	for the following amount:
□ \$25.00 Filing Fe	e S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

IPIXELAT 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 04/16/2024 and assigned Florida document number L24000178649 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." 3030 REEDY CREEK BLVD Enter new principal offices address, if applicable: APΓ J210 (Principal office address MUST BE A STREET ADDRESS) KISSIMMEE, FLORIDA 3030 REEDY CREEK BLVD, APT 210 Enter new mailing address, if applicable: APT J210 (Mailing address MAY BE A POST OFFICE BOX) KISSIMMEE, FLORIDA 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

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

, Florida ___

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
MGR	JUAN P ARIAS	3030 REEDY CREEK BLVD	
		APT J210	□Remove
		KISSIMMEE, FLORIDA	□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
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ective date, if other than the date of ective date is listed, the date must be te: If the date inserted in this block	ate of filing: c specific and cannot be prior to k does not meet the applicab	date of filing or more than s	(optional) 0 days after filing.) Pursuant to	605.0207 listed as
cument's effective date on the Department			,	
cord specifies a delayed effective d s filed.	ate, but not an effective time	e, at 12:01 a.m. on the ca	urlier of: (b) The 90th day a	after the
APRIL 22	2024			
	mfg —			
Si	gnature of a member or authoriz	zed representative of a men	nber	=

Filing Fee: \$25.00