L 24000196933

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
umils

Office Use Only



600434339236

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

	PROMOTE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jessica Olivares		
		Name of Person	
	JO Accounting LLC		
		Firm/Company	
	15885 SW 11th ST		
		Address	
	Pembroke Pines, FL 3302	7	
	-	City/State and Zip Code	
	joacetinglle@gmail.com		
	E-mail address: (to be used for future annual report no	otification)
For further information	concerning this matter, please c	all:	
Jessica Olivares		954 696-7542	
Name	of Person	at () Area Code Dayt	ime Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> Registration	Section	Street Address: Registration S	
Division of Corporations		Division of C	orporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Docusign Envelope ID: 3BEDB42F-093C-4916-9275-CE0E42495EC5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

83RD ST PROMOTE LLC	
(Name of the Limited Liability Company as it nov (A Florida Limited Liability Co	w appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed	d on and assigned
Florida document number L24000196933	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compar	ry," 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)	
	ç;
3. If amending the registered agent and/or registered office address o	n our records, <u>enter the name of the new registe</u>
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Inter Florida street address
	Florida
City	

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.

Docusign Envelope ID: 3BEDB42F-093C-4916-9275-CE0E42495EC5 in amenuing Authorized rerson(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	Rodrigo Pintos		
		443 NE 75 STREET MIAMI, FL 33138	≡ Remove
			□Change
			□Add
			Remove
			□Add
			□Remove
			Change
			□ Add
			🗀 Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□C'hange

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
-	
-	
_	
-	
-	
-	
-	
_	<u> </u>
_	
-	
-	
-	
-	
(If an eff Note:	ive date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led,
Dated	7/29/2024
	6C40FCC18A4A49A of a member or authorized representative of a member
	BC40FCC18A4A49A of a member or authorized representative of a member
	Roberto Lopez, MGR
	Typed or printed name of signee

Filing Fee: \$25.00