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# **COVER LETTER**

	Registration Sec Division of Corp				
0110152	Rebustillos 6	Consulting LLC			
SUBJEC	:I:	Name of Limit	led Liability Company		
The enclo	osed Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please re	turn all correspor	ndence concerning this matter t	o the following:		
		Pedro Steve Moreno Rebus	tillo		
			Name of Person		
		Rebustillos Consulting LLC	;		
		<del> </del>	Firm/Company		
	2636 SW 32nd Ave				<b>ب</b>
			Address		SEC SE
		Miami, Florida 33133			ACCE
			City/State and Zip Code	<del></del>	観り前
		pedrom@mertelbusiness.com		<del></del>	二部三 四
For furth	er information co	e,-mail address: (to oncerning this matter, please ca	o be used for future annual report notif H:	ication)	SECRETARY OF STATE
Pedro St	eve Moreno Reb	ustillo	305 3169225 at ( )		
	Name of	Person	Area Code Daytime	e Telephone Number	
Enclosed	I is a check for th	e following amount:			
□ \$25.	00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

# 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

REBUSTILLOS CONSULTING LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records. ad Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on <u>05/01/2024</u>	and assigned
Florida document number 1.24000203419		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	. <del></del>	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>		2024 KAY 16 AM III: SECRETARY OF S FRALL VIII SSEE.
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	ce address on our records, <u>enter t</u>	he name of the newsregister
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flor	rida
	City	Zip Code

## 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 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	Ana De Las M. Rebustillo Salazar	2118 Morgan Run, Hudsonville, MI 49426-9829	<b>=</b> Add
			□Remove
			□ Change
MGR	Pedro S. Moreno Rebustillo	2636 SW 32nd Ave, Miami, Fl. 33133	
			□Remove
			<b>■</b> Change
			□ Add
		SECRETAR	2024 Remove
		SSEC. STATE	# F
			□ Remove □ Change
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te: If the date inserted in this blo	ck does not meet the applicable stat		
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is filed.	date, but not an effective time, at 1.	2.07 a.m. on me carner or. (	(r) The sourcing after the
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	/ M/v. n1 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	resentative of a member	

Typed or printed name of signee