## L2400228248

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## **COVER LETTER**

COVERGETTER	
TO: Registration Section Division of Corporations	
SUBJECT: Enforma USA LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Tsakel Coevas Name of Person	
Firm/Company	
256 Hampton Loop	
Davenport FL 33837  Chy/State and Zip Code  enformage @ amail com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (407) 405 - 6477  Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Status Solution Status Solution Status Solution Status Solution Status Solution Solu	f Status &
	.: ZI

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 810r 1-17
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000238248</u>	were filed on $5/16/2024$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	City Florida City S
New Registered Agent's Signature, if changing Registered Agent:	City Codes
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, 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 Title Name Address Type of Action Isabel C Cuevas 256 Hampton Coop Davenport, FL 33837 DRemove \_\_\_\_\_**\**Change MER Diana M. Ortega Calle 3 Sur 5-13 Albergne Add Piedrahita Evadalajara de laga, Dremove VA 76304 - 1 CO Schange □Remove \_\_\_\_\_ Change \_\_\_\_\_\_ □Add □Remove \_\_\_\_\_ Change Remove... □Remove

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