

8/12/2024 12:27 PM

Division of Corporations

At: 2793

L241000270074

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000270074 3)))



H240002700743ABC-

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FREEDOMTAX ACCOUNTING & MULTISERVICES, INC.
Account Number : I20180000068
Phone : (407)344-1012
Fax Number : (407)344-1371

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MARIA PALOMARES LLC

Certificate of Status	0
Certified Copy	0
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K. SALY

AUG 13 2024

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2024 AUG 12 PM 1:27

07/11/2024



ALB. 12/20/24 11:45 PM

COVER LETTER

H240002 ALB. 2703 12/17/24 2

TO: Registration Section
Division of Corporations

SUBJECT: MARIA PALOMARES 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:

FRANCISCO D MARTINEZ

Name of Person

FREEDOMTAX ACCOUNTING

Firm/Company

1016 E OSCEOLA PARKWAY

Address

KISSIMMEE, FL 34744

City/State and Zip Code

DMARTINEZ@FREEDOMTAXFL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCISCO D MARTINEZ

407

344-1012

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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)

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

AUG 12 2024 11:45 PM

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

AUG 12 2024 11:45 PM

FILED

2024 AUG 12 AM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MARIA PALOMARES 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 5/17/2024 and assigned
Florida document number L24000230074.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1110 BRICKELL AVE

#430K-60

MIAMI, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1110 BRICKELL AVE

#430K-60

MIAMI, FL 33131

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:

1110 BRICKELL AVE #430K-60

Enter Florida street address

MIAMI

City

Florida 33131

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 Changing Registered Agent, Signature of New Registered Agent

Aug 12, 2004 11:45 AM
If a person(s) authorized to manage, enter the title, name, and address of person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIA PALOMARES SAMPER	1110 BRICKELL AVE	<input type="checkbox"/> Add
		#430K-60	<input type="checkbox"/> Remove
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2004 AUG 12 AM 11:26
FBI MIAMI

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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2024 AUG 12 AM 4:26
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated: AUGUST 12 2024

[Signature]

Signature of a member or authorized representative of a member

Typed or printed name of signee