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	(Requestor's Name)
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PICK-U	P WAIT MAIL
	(Business Entity Name)
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Cesar Andres Arias Ramirez 1037 N Elmwood Ave Waukegan, IL 60085 Phone: (224) 390-3467 August 13, 2024

Registration Section
Division of Corporations
The Centre of Tallahassee, 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32301

Subject: Request to Amend Articles of Organization CAMEL Solutions LLC

Dear Sir/Madam,

I am writing to formally request an amendment to the Articles of Organization for CAMEL Solutions LLC. Please find the enclosed Articles of Amendment, which reflect the specific changes to be made to our company's original Articles of Organization.

The changes we are requesting include:

- 1. Add a new member: MRG, Gloria D Ramirez Gabaldon.
- 2. Add a new member: AMBR, Andres Eliseo Arias Lugo
- 3. Change email address: cesar.andresariasr@gmail.com

We have carefully reviewed the requirements for submitting an amendment and have included all necessary forms and documentation, along with the required filing fee.

Please confirm receipt of this amendment request at your earliest convenience. Should you require any additional information or have any questions, do not hesitate to contact me directly at (224) 390-3467 or via email at [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

Cesar Andres Arias Ramirez

## **COVER LETTER**

T(): Registration Division of C			
	SOLTUTIONS LLC		
SUBJECT:	Division of Corporations  SHECT:  CAMEL SOLTUTIONS LLC  Name of Limited Liability Company  Penclosed Articles of Amendment and fee(s) are submitted for filing.  See return all correspondence concerning this matter to the following:  Cesar Arias  Name of Person  CAMEL SOLTUTIONS LLC  Firm*Company  1037 N ELMWOOD AVE  Address  WAUKEGAN, IL 60085  City/State and Zip Code  cesar.andresariasr@gmail.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  sar Arias  Name of Person  Name of Person  Daytime Telephone Number  closed is a check for the following amount:  # \$25,00 Filing Fee  Certificate of Status  Certified Copy  Certificate of Status		
The enclosed Articles	of Amendment and fee(s) are sub-	nitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Cesar Arias		
		Address  VAUKEGAN, IL 60085  City/State and Zip Code sar.andresariasr@gmail.com  E-mail address: (to be used for future unnual report notification)  ming this matter, please call:    \$30.00 Filing Fee & Criffed Copy (additional copy is enclosed)   \$30.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)   Street Address: Registration Section	
	CAMEL SOLTUTIONS L	LC	
		Firm/Company	
	1037 N ELMWOOD AVE		
		Address	
	WAUKEGAN, IL 60085		
		·	
	_		titication
For further informatio			······································
Cesar Arias			
Nam	e of Person	Area Code Daytin	me Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
P.O. Box 6	on Section f Corporations	Registration S Division of Co The Centre of	orporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAMEL SOLUTIONS LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company willorida document number <u>L24000250815</u>	ere filed on June 03, 2024	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
he new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the	
Enter new principal offices address, if applicable:		2024 A.
	edia."	
Principal office address MUST BE A STREET ADDRESS)		1.5
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		<del></del> 0
Enter new mailing address, if applicable:		<del>-0</del>
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(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
3. If amending the registered agent and/or registered office adegent and/or the new registered office address here:  Name of New Registered Agent:	ldress on our records, enter the r	name of the new regi
Traine of Front Registered Figure		
New Registered Office Address:	Enter Florida street address	
	gn: 4.3	_
	, Florida	Ziv 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	Gloria Gabaldon	1037 N ELMWOOD AVE, WAUKEGAN. IL 60085	■Add
			_ □Remove
			_ Change
AMBR	Andres Arias	1037 N ELMWOOD AVE, WAUKEGAN, IL 60085	≣Add
			🗆 Remove
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			□Add
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record specifie is filed.	s a delayed effe	ctive date, but	not an effectiv	re time, at 12:	:01 a.m. on the	earlier of: (b)	The 90th day af	ter the
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ated					180	<u> </u>	_	
ated		Signature o	f a member or a	uthorized repro	esentative of a me	ember	-	