

Division of Corporations

L24 000261111

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

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

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2025 MAR -4 AM 9:18
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INSTITUTO SOCIOCULTURAL AMERICANO ISA LLC

Certificate of Status	0
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Electronic Filing Menu

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INSTITUTO SOCIOCULTURAL AMERICANO ISA 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 06/07/2024 and assigned Florida document number L24000261111

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

INTERNATIONAL ISA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

13941 FAIRWAY ISLAND APT 721

(Principal office address MUST BE A STREET ADDRESS)

ORLANDOM FL 32837

Enter new mailing address, if applicable:

13941 FAIRWAY ISLAND APT 721

(Mailing address MAY BE A POST OFFICE BOX)

ORLANDOM FL 32837

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:

GLORIA PEREZ

New Registered Office Address:

13941 FAIRWAY ISLAND APT 721

Enter Florida street address

ORLANDO

City

Florida 32837

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

[Handwritten signature of Gloria Perez]

FILED 2025 MAR 4 AM 8:27

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	John Anderson Fernandez Pena	13941 FAIRWAY ISLAND APT 721	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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