## L24 000 263 149

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
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NO \$ 7130/24

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	DESIGN	BY RONNY LL	C.		
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Ronny Adino			
	<del></del>	Name of Person			
	/	Jan Atim			
		Fign/Company	<del></del>		
	(0)				
	601	SW 10 th St			
			<b>-</b> 1 00 1		
		Hallandale Beach City/State and Zip Code	, FL 33009		
	,	connu odino 2019 (Dio to be used for future annual report noti			
	E-mail address: (	to be used for future annual report not	(fication)		
For further information of	concerning this matter, please c	all:			
D -	λ	79/	701 2NC)		
Name o	of Person	at ( + 1 ) - + 86 Area Code Daytim	re Telephone Number		
Enclosed is a check for the	he following amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,		
7	Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		
		(additional copy is enclosed)	(additional copy is enclosed)		
<b>55</b> W 3.11		Carrat & didenger			
Mailing Addres Registration S			Street Address: Registration Section		
Division of C		Division of Cor			
P.O. Box 632	-	The Centre of T	allahassee		
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

No Check

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compan (A Florida Limited Li	RONNY  nv as it now appear  liability Company)	s on our records.)	· · <u> </u>	
The Articles of Organization for this Limited Liability Company of Florida document numberL_24000263-149	were filed on	06/10/2024	and ass	igned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company he	ere:		
The new name must be distinguishable and contain the words "Limited Liabili	in Company "the d	ecianation "LLC" or the ab	braviation "L	- C"
The new name must be distinguishable and contain the words. Climited Clabiff	ty Company, the u	esignation LEC of the ago		
Enter new principal offices address, if applicable:		` :	<u>- S</u>	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			· · · · · · · · · · · · · · · · · · ·	<u> </u>
		· · · · · · · · ·	<u> </u>	<u></u>
			AH	
Enter new mailing address, if applicable:	-		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>		<u> </u>	
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our re	ecords, <u>enter the nam</u>	e of the new	registere
Name of New Registered Agent:			<del></del>	
Name Benistared Office Address:				
New Registered Office Address:	Enter Flor	ida street address	<u> </u>	
		. Florida		
	City	,	Zip Code	<u> </u>
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as properties to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of rovided for in C	my duties, and I am f Chapter 605, F.S. Or,	amiliar with if this docu	h and ment 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Ronny Adino	601 SW 10 th St, Hallandale	Beoch DAAdd
		FL 33009	□Remove
MGR	Gabriel Martinez	9000 NW 32 ND AVE	- Miam
		FL 33147	Remove
			Change
			□ Add
			□Remove
			□ Change
			🗀 Add
			□Remove
		<del></del>	□Change
			□ Add
			□Remove
			Change
			🗀 Add
			□Remove
			□ Change

-	
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-	<u> </u>
_	
n effect <u>te:</u> If	date, if other than the date of filing:
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	07/17/2024
	Signature of a member or authorized representative of a member
	Signature of a memory of authorized representative of a memori
	Gabriel Martines

Filing Fee: \$25.00