L24000272332





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06/27/24--01012--010 *** 5.00

7/15/24 KH

COVER LETTER

TO: Registration Section **Division of Corporations** EQUITY TRUST COMPANY CUSTODIAN FOR THE BENEFIT OF WILLIAM SALCED SUBJECT: 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: William Salcedo Name of Person Firm/Company 210 NE Abaca Way Address Jensen Beach / Florida 34957 City/State and Zip Code wsalpod@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William Salcedo 349-4019 Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

Mailing Address:

■ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

☐ \$30.00 Filing Fee &

Certificate of Status

Street Address:

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed).

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroc Street, Suite 810 Tallahassee, FL 32303

☐ \$60.00 Filing Fee.

Certified Copy

Certificate of Status &

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

EQUITY TRUST COMPANY CUSTODIAN FOR THE BENEFIT OF WILLIAM SALCEDO IRA, 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	4 and assigned	
Florida document number L24000272332			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designati	on "L1.C" 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:	address on our records	, enter the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida Zip Code	
	City	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Janice Salcedo	210 NE Abaca Way, Jensen Beach Fl. 34957	□Add
			■ Remove
MGR	Jacqueline Salcedo	425 49th St., Virginia Beach VA 23451	■Add
			□Remove
			□Change
			□Add
			□Remove
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