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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Phone

Account Number : I20160000049

Fax Number

: (954)384-8565 : (954)385-5175

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

Email Address: Support @ etlatinaccounting. Com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CENSI EVOLUTION LLC

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K. SALY

AUG 14 2024

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Corporate Filing Menu

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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: CENSIEV	OLUTION LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
rense return an concespe	machee concerning this matter	to the following.	
	DIEGO FIGUEROA		
		Name of Person	
	E & F LATIN GROUP, L	.L.Ç.	
		Firm/Company	
	1820 N CORPORATE LA	KES BLVD SUITE 109	
		Address	
	WESTON, FL 33326		
		City/State and Zip Code	
	DIEGO@EFLATINACCO	UNTING.COM (to be used for future annual report not)	fication)
For further information of	oncorning this matter, please o		,
DIEGO FIGUEROA		954 384 - 8565	
Nanic o	f Person	at (954) 384 - 8565 Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	© \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	© \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	ist:	Street Address:	
Registration 5	Section	Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	
P.O. Box 632 Tallahassee, l			allanassee e Street, Suite 810
, andragget, i		Tallahassee, FL	-

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CENSI EVOLUTION LLC		91(1)	
(Name of the Umited Limited Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	-	
The Articles of Organization for this Limited Liability Company	were filed on	assigned	
Florida document numberL24000312785			
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 Liabi	lity Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	336 GOLFVIEW RD APT 1007		
(Principal office address MUST BE A STREET ADDRESS)	PAUM BEACH GARDENS, FL 33408	-	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office	address on our records, enter the name of the s	<u>iew registere</u>	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addiess		
	, Florida		
New Registered Agent's Signature, If changing Registered Agent:		A*	
Thereby accept the appointment as registered agent and agr		mala wak 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

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>	Name	Address	Type of Action
MGR	GIRALDO CENSI, NICOLAS	336 GOLFVIEW RD APT 1007	
		PALM BEACH GARDENS, FL 33408	©Remove
			≡ Change
MGR	CENSI RESTREPO, TAMARA	336 GOLFVIEW RD APT 1007	
		PALM BEACH GARDENS, FL 33408	□ Remove
			■ Change
			DAdd
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ffectiv	e date is listed, the date must be spi te date inscrted in this block do	ecific and cannot b	e prior to date of	filing or more than 9	0 days after filing	.) Porsuant to 605,020
	s effective date on the Departm			tory tingg require	ments, this gatt	with not be fisted a
rd sp iled	ecifies a delayed effective date,	but not an effec	tive time, at 12	:01 a.m. on the ca	dierof: (b) T	te 90th day after the
l	August 13 Signal		24	•		
	J	, 4	1711)		

Filing Fee: \$25.00