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	equestor's Name)	
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(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		AS TITI LLC		•
30000	··	Name of Limi	ted Liability Company	
		Amendment and fee(s) are sub- ndence concerning this matter		
		YANORY A ZAVALA A	GUILAR	
			Name of Person	
		GOLOSINAS TITI LLC		
			Firm/Company	
		1320 21ST ST E		
			Address	
		BRADENTON, FL 34208		
		JADENLOPEZZAV2016@	City/State and Zip Code	2021
		=	to be used for future annual report notification)	— REC
For furt	her information c	oncerning this matter, please ca	all:	C-3 P
YAN0	RY A ZAVALA	AGUILAR	941 242-3310 at ()	PH 1: 5
	Name o	f Person	Area Code Daytime Telephone	ADZIL DEC -3 PH 4: 52 SELECTION STATE SELECTION STATE
Enclose	d is a check for th	he following amount:		
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee. Certificate of Status & Certified Copy additional copy is enclosed)
	MAIL	ING ADDRESS:	STREET/COURIER ADDR	RESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLOSINAS TITI ELC		
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 09/25/2024	and assigned
Florida document number 1.24000410235		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2021
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		enter the name of the nev
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	, Flori	
	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 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>	<u>Address</u>	Type of Action
MGR	MAYCOL J ZAVALA AGUILAR	1314 20TH ST E	☐ Add
		BRADENTON, FL 34208	■ Remove
			□ Change
			Add
			☐ Remove
			Change
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			PHOTATORE SZE
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	11/19/2024
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i an eil	ective date, if other than the date of filing:
locum	ient's effective date on the Department of State's records.
	TA 5
е ге	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
The	90th day after the record is filed.
	NOVMBER 19 / A 2024
Jated	ROVAIDER 19
	Called to the state of the stat
	Signature of a member or authorized representative of a member
	YANORY AZAVALA AGUILAR
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00