## L25000209341

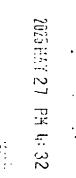
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C/ 1/22/2025

## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Se Division of Cor					
ESTESEB/	A LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are subt	nitted for tiling.			
Please return all correspo	ondence concerning this matter	to the following:			
	Dona Nunez				
		Name of Person			
	Jurado & Associates, P.A.				
		Firm/Company			
	10800 Biscayne Blvd., Suit	e 850			
		Address			
	Miami, FL 33161				
		City/State and Zip Code			
	dona@juradolawfirm.com	to be used for future annual report notif	Tootion)		
For further information of	ri-mail address: (i concerning this matter, please ca		ileanon)		
	, , , , , , , , , , , , , , , , , , ,	÷1 305-921-097	6		
Dona Nunez		at ()			
Name o	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addre		Street Address:	ation		
Registration Division of C		Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327		The Centre of T			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESTESERA LLC

2025 FEAY 27 PM 4: 33

(Name of the Limited Liability Co	mpany as it now appears on our records.) - ited Liability Company)	•
(A Florida Limi	ited Liability Company)	<del>-</del> : ···
The Articles of Organization for this Limited Liability Comp Florida document number <u>L25000209341</u> .	pany were filed on 05/02/2025	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the 1	name of the new registere
Name of New Registered Agent:		<u> </u>
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address	
	Enter Florida street address , Florida	Zip Code

## New Registered Agent's Signature, it 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>	Address	Type of Action
MGR	JUANNA FABIOLA LONCHARIO	13970 FERNANDO AVE.	
		APPLE VALLEY, MN 55124	■Remove
			Change
MGR	IVANNA FABIOLA LONCHARIO	13970 FERNANDO AVE.	\= Add
		APPLE VALLEY, MN 55124	
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

D. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
<del></del>	
Note: If the date inserted in the	the date of filing:
If the record specifies a delayed eff record is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated May 21	2025
	Signature of a member or authorized representative of a member
	RICHARD JAMES LINARES CABANILLAS
	Typed or printed name of signee

Filing Fee: \$25.00