

L25000 286572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

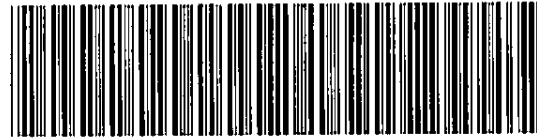
(Document Number)

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JUL 17 2025

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2025 JUL 16 PM 4:22  
FILED

2025 JUL 16 PM 12:35  
FILED

# TALLAHASSEE COURIER SERVICES LLC

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TALLAHASSEECOURIER@GMAIL.COM

COVER LETTER

Brandon Long, (850) 491-9625

## **AMENDMENT**

### **FILING FEE**

**\$25.00 (check attached)**

### **Business Name:**

**NEWROHACKERS LLC**

### **Document Number:**

**L25000286572**

# TALLAHASSEE COURIER SERVICES LLC

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**Business Name:**

**NEWROHACKERS LLC**

**Document Number:**

**L25000286572**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

NEWROHACKERS LLC

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:

ZULY TATIANA ROJAS RAMO

Name of Person

Firm/Company

6900 TAVISTOCK LAKES BLVD SUITE 400

Address

ORLANDO FLORIDA 32827

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

|                          |           |                          |
|--------------------------|-----------|--------------------------|
| ZULY TATIANA ROJAS RAMOS | 407       | 334-6803                 |
| Name of Person           | Area Code | Daytime Telephone Number |

Enclosed is a check for the 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 Address:**

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

**Street Address:**

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

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

NEWROHACKERS LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2025 JUL 15 PM 12:36

The Articles of Organization for this Limited Liability Company were filed on 06/25/2025 and assigned  
Florida document number 1.25000286572.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

NEUROHACKERS LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

ZULY TATIANA ROJAS RAMOS

6900 TAVISTOCK LAKES BLVD SUITE 400

ORLANDO FLORIDA 32827

**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 new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

ADVANCE INSURANCE GROUP AND TAX SERVICES

New Registered Office Address:

13550 VILLAGE PARK DR UNIT 125

*Enter Florida street address*

ORLANDO

*City*

Florida

32837

*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>                             | <u>Type of Action</u>                      |
|--------------|--------------------------|--|--|
| MGR          | ZULY TATIANA ROJAS RAMOS | 2953 VOYAGER AVENUE ST CLOUD FLORIDA 34771 | <input type="checkbox"/> Add               |
|              |                          |  | <input type="checkbox"/> Remove            |
|              |                          |  | <input type="checkbox"/> Change            |
| AMBR         | MARTHA RAMOS             | 3071 ELLA WAY ST CLOUD FLORIDA 34771       | <input type="checkbox"/> Add               |
|              |                          |  | <input type="checkbox"/> Remove            |
|              |                          |  | <input checked="" type="checkbox"/> Change |
|              |                          |  | <input type="checkbox"/> Add               |
|              |                          |  | <input type="checkbox"/> Remove            |
|              |                          |  | <input type="checkbox"/> Change            |
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|              |                          |  | <input type="checkbox"/> Remove            |
|              |                          |  | <input type="checkbox"/> Change            |

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

ZULY TATIANA ROJAS RAMOS

ZULY TATIANA ROJAS RAMOS

**Filing Fee: \$25.00**