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COVER LETTER

	Registration S Division of Co						
SUBJEC	Saiano, Li	LC .					
SOUTE.	··	Name of Lin	nited Liability Company				
The enck	sed Articles o	f Amendment and fee(s) are sul	bmitted for filing.				
Please ret	um ali corresp	ondence concerning this matter	to the following:				
		Paul K. Heuerman					
			Name of Person				
		Roetzel & Andress, LPA					
	Firm Company						
	850 Park Shore Drive, Third Floor						
							
		Naples, FL 34103					
			City/State and Zip Code				
		phouerman@ralaw.com	to be used for future annual report noti	Fig. attorn)			
For furthe	r information	concerning this matter, please o	•	stemates;			
Paul K 1			239 649-6200				
	Name	of Person	at () Area Code Daytim	e Telephone Number			
Enclosed	is a check for t	he following amount:					
≅ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	 \$55 00 Filing Fee & Certified Copy (additional copy is enclased) 	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 			
F C P	Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Forporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'allahassee e Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2020 AFP. 27 PH 12: 38

Sajano, 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 8/21/2009 and assigned Florida document number 1,09001081067 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 Liability Company," the designation "LLC" or the abbreviation "LLC" 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 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: New Registered Office Address: Enter Florida street address , Florida _

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 2020 AFR 27 PM 12: 38

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michaela Giudici Hurth	VIA CANTONALE 54	iii Add
		6919 CARABIETTA SWITZERLAND	
MGR	Annamaria Chiara Giudici	VIA CANTONALE 54	
		6919 CARABIETTA SWITZERLAND	⊒Remove
			©Change
		<u></u>	CA&I
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e: If the date inserte	the date must be specific a d in this block does no e on the Department o	t meet the applica	o date of filing or ble statutory fili	more than 90 days a ng requirements,	iter filing) Pursuant to 605 (this date will not be liste
	ed effective date, but r	ot an effective tin	ne, at 12:01 a.m	, on the earlier of:	(b) The 90th day after
ord specifies a delay filed					