Florida Department of State

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To:

Division of Corporations

Fax Number : (852)617-5383

From:

Account Name : FASTKIT CORP

Account Number : 120100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TORINO GROUP TWO LLC

C. BRUMBLEY OCT 20 2022

Certificate of Status Certified Copy Page Count Estimated Charge

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\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TORINO GROUP TWO LLC		
(Name of the Limited Limitin Comp. (A Fiorita Limited	any as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company		prá serie- a
Fiorida document number L14000135689		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
The new name must be distinguishable and comain the words "Limited Liabil	ity Company, the designation "LLC" or the shire	massium "It 3 C V
Enter new principal offices address, if applicable:	the state of the state of	2022 2027 2027
(Principal office address MUST BE A STREET ADDRESS)		7 8 T
Enter new mailing address, if applicable:		SSER TH
(Mailing address MAY BE A POST OFFICE BOX)		75 9 D
		15
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ldress on our records, enter the paine of	the new registered
Name of New Registered Agent:		
New Registered Office Arkings:		
	Enter Florida street address	
	Florida	
New Registered Agent's Signature, if changing Registered Agent;	Cię. 21	o Code

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 603, 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

Title	Name	Address	Ivpe of Action
MGR	A & B TRUSTEE PARTNERS LTD	3370 MARY STREET	
		MIAMI, FLORIDA 33133	≅ Remove
			@Change
MGR	ANDREA VELLETRANI	3370 MARY STREET	\ \ \ \
		MIAMI, FLORIDA 33133	Плетюче
			Change
			
			□Remove
			DClunge
			©Remove
			Change
			EAdd
			□Remove
			□Change
			CRamove

		 -	

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fective date, if other than the da in effective date is listed the date maist be nice. It the date interested in this blood	te of filing:	Are of 6Very a more than 01	(optional)
<u>ple:</u> If the date inserted in this block current's effective date on the Department's effective date on the Department.		le statutory filing requires	nonis, this date will not be listed
ecord specifies a delayed effective d is filed.	ne, but not an effective time	t, at 12:01 a.m. on the ear.	lier of: (b) The 90th day after th
SEPTEMBER 26th	2022		
	1/1/1		
	nature of a member or authoriz		

Filing Fee: \$25.00