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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J.	HORNE
	NO'	v - 8 2022

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	11/07/2022	
	Merritt Walke	-
	1829618	
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		norization to Transact Business
✓ Amen	dment	
Chan	ge of Agent	
Reins	tatement	
Conve	ersion	
☐ Merge	er	
☐ Disso	lution/Withdrawal	
☐ Fictition	ous Name	
✓ Other	CERT	FIED COPY OF THE FILING EVIDENCE
Authorized A	.mount:\$	55
Signature:	т	w

F: +852.2682.9790



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Account#: I20000000088

Date: 11/0	7/2022	
Name: N	// derritt Walker	
Reference #:		
		AEA21 LLC
Articles of li	ncorporation/Authoriz	ation to Transact Business
Amendmen	t	
☐ Change of A	Agent	
Reinstatem	ent	
Conversion		
☐ Merger		
☐ Dissolution/	Withdrawal	
☐ Fictitious Na	ame	
✓ Other	CERTIFIED	COPY OF THE FILING EVIDENCE
Authorized Amoun	it: \$55	
Signature:	mw	

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

AEA21 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 __09/29/2014 Florida document number __L14000151868 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 "L.L.C." 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

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.

City

. Florida

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	EĐUARDO RIGON LOJA	215 DEGRAW ST APT 4A	□Add
		BROOKLYN, NY 11231	
			□Change
			□ Add
			□Remove
			☐ Change
			□Add
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efive date, if other than the date effective date is listed, the date must be set If the date inserted in this block cament's effective date on the Depart	pecific and cannot be prior to dat loes not meet the applicable	e of filing or more than 90 statutory filing require	(optional)) days after filing.) Pursuant nents. this date will not b	to 605.02 oc listed
ord specifies a delayed effective dat filed.	e, but not an effective time, a	it 12:01 a.m. on the car	lier of: (b) The 90th da	y after th
October 12 d	2022			
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	ature of a member or authorized			