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COVER LETTER

TO:	Registration Sec Division of Cor			
CUDU	TOMLUC,			
SUBJI	ECT:		nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		JOHN S. BOHATCH, ES	Q.	
			Name of Person	
		GUTTENMACHER, BOH	HATCH & PENARANDA, P.A.	
			Firm/Company	
		7301 SW 57th Court, Suite	e 560	
			Address	
		South Miami, FL 33143		
			City/State and Zip Code	
		JBohatch@gbptaxlaw.com	to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please of	•	 ,
JOHN	S. ВОНАТСН, ES	SQ.	305 666-1040	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
■ \$2	5.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOMLUC, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L	iability Company	were filed on September 24, 2015	and assigned
Florida document number L15000163091	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	of the limited liab	ility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity 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)		808 Brickell Key Drive, Unit 1108	
		Miami, FL 33131	
Enter new mailing address, if applicable:		808 Brickell Key Drive, Unit 1108	
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33131	

B. If amending the registered agent and registered agent and/or the new registered o			r the grame of the r
			AHA I
Name of New Registered Agent:	·	,	SAY
New Registered Office Address:	808 Brickell K	ey Drive, Unit 1108	1. 0 L
		Enter Florida street address	Los & D
	Miami	, Florida 🤄	BIST C
		City	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>	Address	Type of Action
MGR	JUAN H COLON GUERRERO	808 Brickell Key Drive, Unit 1108	
		Miami, FL 33131	□ Remove
			■ Change
MGR	CARMEN A. HAWAYEK DE COLON	808 Brickell Key Drive, Unit 1108	□ Add
		Miami, FL 33131	Remove
			Change
			Add
			☐ Remove
			Change
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ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of filing or mote: If the date inserted in this block does not meet the applicable statutory filing	nore than 90 days after filing.) Pursuant to 605.02
ocument's effective date on the Department of State's records.	g requirements, this date will not be nated a
e record specifies a delayed effective date, but not an effective the formula of the feetive the record is filed.	time, at 12:01 a.m. on the earlier
ated 424/18, Queleen Hann Culative of a member or authorized representative	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00