L21000405384

| (Requ | uestor's Name) | · - |
|----------------------------|-----------------|-------------|
| — (Addı | ress) | |
| (Addi | ess) | |
| (City/ | State/Zip/Phon | e #) |
| PICK-UP | MAIT | MAIL |
| (Busi | ness Entity Nar | me) |
| (Doct | ument Number) | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Fi | ling Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



700407424327

7P3 #22 26 | KT 9: 59

COVER LETTER

| OS BEBIT | OS LLC | | |
|---------------|--|--|---|
| | Name of Limi | ited Liability Company | |
| Articles of : | Amendment and fee(s) are sub- | mitted for filing. | |
| ll correspo | ndence concerning this matter | to the following: | |
| | Marielena Obrenic | | |
| | | Name of Person | |
| | Los Bebitos LLC | | |
| | | Firm/Company | |
| | 738 Crest Pines Dr. Unit 73 | 26 | |
| | | Address | 202 |
| | Orlando Fl 32828 | | 1023 APR 26 |
| | | City/State and Zip Code | 20 |
| | | to be used for future annual report notific | ration) |
| ormation co | | | 37 H G |
| enic | | 407 7166460 | ι, ω |
| Name of | Person | | Telephone Number |
| heck for th | e following amount: | | |
| ing Fec | ■ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | Street Address: Registration Sect | tion |
| sion of C | orporations | Division of Corp | orations |
| Box 632 | 7 | The Centre of Ta 2415 N. Monroe | |
| | on of Cory OS BEBIT Articles of a Il correspond Theck for the ling Fee In a Address stration Sister of C | Articles of Amendment and fee(s) are substituted | Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Marielena Obrenic Name of Person Los Bebitos LLC Firm-Company 738 Crest Pines Dr. Unit 726 Address Orlando Fl 32828 City/State and Zip Code marieinpeace@gmail.com E-mail address: (to be used for future annual report notific princation concerning this matter, please call: enic Name of Person Area Code Daytime theck for the following amount: ing Fee \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) ng Address: stration Section Registration Section Since Address: Registration Section Sicon of Corporations |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Los Bebitos LLC | | | ···· | | |
|--|---|--|--------------------------------|--|--|
| (Name of the Lim | ted Liability Company as i (A Florida Limited Liabilit | it now appears on our record y Company) | <u>K.</u>) | | |
| The Articles of Organization for this Limited Liability Company were filed on April 6 2023 | | | and assigned | | |
| Florida document number | · | | | | |
| This amendment is submitted to amend the fol | lowing: | | | | |
| A. If amending name, enter the new name of | of the limited liability c | company here: | | | |
| The new name must be distinguishable and contain the | words "Limited Liability Co | mpany," the designation "LLC | " or the abbreviation "L.L.C." | | |
| Enter new principal offices address, if appli | cable: | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | · 3 | | |
| | | | ि कि | | |
| | | | 26 | | |
| Enter new mailing address, if applicable: | | | | | |
| (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | | 100 0 | | |
| | | | F= 5 | | |
| B. If amending the registered agent and/or agent and/or the new registered office address. | • • | ess on our records, <u>enter</u> | the name of the new registered | | |
| Name of New Registered Agent: | Ricardo Jose Zamudi | o Ortiz | | | |
| New Registered Office Address: | 738 Crest Pines Drive | e Unit 726 | | | |
| | | Enter Florida street addres | N. | | |
| | Orlando | FI | orida <u>32828</u> | | |
| | (| 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 | Ricardo Jose Zamudio Ortiz | 738 Crest Pinres Drive Unit 726 Orlando Fl 32828 | = Add |
| | | | ElRemove |
| | | | □ Change |
| | | | □Add |
| | | | □Remove |
| | | <u>!</u> | TChange |
| | | | 6// |
| | | | Remove () |
| | | | |
| | | | □Remove |
| | | | ©Change |
| | | | JAdd |
| | | | 🗆 Remove |
| | | | □ Change |
| | | | |
| | | | □Remove |
| | | | □Change |

| Fleetive date, if other than the date of filing: (optional) (optional) | | | · · · · · · · · · · · · · · · · · · · | | | | | |
|--|--|--|---|--|-------------------------|---------------------|-------------------------------------|-------------|
| Flective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| Flective date, if other than the date of filing: | | | | | | | | |
| Frective date, if other than the date of filing: | | | | | | | - | |
| Frective date, if other than the date of filing: | | | | | | | | |
| Frective date, if other than the date of filing: | | | | | | | | |
| Frective date, if other than the date of filing: | | | <u> </u> | | · · · · | | | |
| Frective date, if other than the date of filing: 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 605.05 ofte. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occument's effective date on the Department of State's records. The specifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the filed. Signature of a metabolic date representative of a member 255 Marielena Zamudio. Typed or printed name of signee. | | - | · · · · · · · · · · · · · · · · · · · | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| Frective date, if other than the date of filing: 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 605.02 ofter. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed beaument's effective date on the Department of State's records. The 90th day after the filed. April 6 Signature of a mention fauthorized representative of a member 2023 Marielena Zamudio 7 Typed or printed name of signee 9 Typed or printed n | | | | | | | | |
| Marielena Zamudio Typed or printed name of signee (optional) (o | | | | · | | | | |
| Tective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: 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 605.02 ofter. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occurrent's effective date on the Department of State's records. 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 date of the date of a member of a | | | <u></u> | | | | ····· | |
| ffective date, if other than the date of filing: | | | | | | | | |
| ffective date, if other than the date of filing: | | | | | | | | |
| 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 605.02 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occurrent's effective date on the Department of State's records. 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 first filed. Signature of a member authorized representative of a member Signature of a member Typed or printed name of signee | | | | | | | | |
| 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 605.02 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occurrent's effective date on the Department of State's records. 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 first filed. Signature of a member authorized representative of a member Signature of a member Typed or printed name of signee | | | | | ···· | | | |
| April 6 Signature of a member ranthorized representative of a member 25 Marielena Zamudio Typed or printed name of signee 99 | CCa = 43-va d | e date is listed, the date must the date inserted in this blo | t be specific and cannot ock does not meet t | ot be prior to date of fil the applicable statute | ling or more than 90 da | ys after filing.) P | ursuant to 605. ill not be liste | 020 a br |
| Signature of a member authorized representative of a member 25 Marielena Zamudio Typed or printed name of signee 29 | an effective ote: If th | | | | | | | |
| Signature of a member authorized representative of a member 25 Marielena Zamudio Typed or printed name of signee 99 | an effective (ote: If the ocument's record spe | | e date, but not an ef | ffective time, at 12:0 | I a.m. on the earlie | r of: (b) The (| ∂0th day after | · the |
| Marielena Zamudio Typed or printed name of signee | an effective of the ocument's record specified. | ecifies a delayed effective | Λ | \wedge | 01 a.m. on the earlie | r of: (b) The (| ⊅0th day after | · the |
| Marielena Zamudio Typed or printed name of signee | an effective of the ocument's record specified. | ecifies a delayed effective | Λ | \wedge | 01 a.m. on the earlie | r of: (b) The ' | | the |
| Marielena Zamudio Typed or printed name of signee | an effective of the ocument's record specified. | ecifies a delayed effective | Λ | \wedge | II a.m. on the earlie | rof: (b) The f | | - the |
| Typed or printed name of signee | an effective of the ocument's record specified. | ecifies a delayed effective | 20 | 123 | | <u> </u> | | - the |
| The state of the s | an effective of the comment's record spectified. April ated April 2 a | ecifies a delayed effective | 20 | 123 | | <u> </u> | 2023 APİ 26 | the |
| F 59 | an effective sote: If the locument's record speed is filed. | ecifies a delayed effective | Signature of a metal | 123 | sentative of a member | <u> </u> | 2023 API 26 AF | c the |

Filing Fee: \$25.00