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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 Phone : (407)843-4600

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONTINENTAL COMMERCE, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited Li	ommerce, ELC iv as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L22000116025</u>	were filed on March 21, 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new mame of the limited liable	lity/company here:
Continental Commerce USA LLC The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1700 NW 97th AVE #226833
(Principal office address MUST BE A STREET ADDRESS)	DORAL, FLORIDA 33222-5038
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	POST OFFICE BOX 226833 DORAL, FLORIDA 33222-6833
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: n/a	
New Registered Office Address:	Enter Florida street address Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code : 51

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 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>	Name	Address	Type of Action
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Note: If the	date, if other than the date of filing:n/a(optional) e 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed to the date on the Department of State's records.
e record sp rd is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated MA	Y 25 , <u>2022</u>

Filing Fee: \$25.00