Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 : (954)384-8565 Fax Number : (954)385-5175

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ENDOSCOPE AND BIOMEDICAL ADVANCED SERVICES LLC

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COVER LETTER

TO;	Registration Se Division of Cor		•	· 1		
SUBJEC		PE AND BIOMEDICAL ADV	ANCED SERVICES LLC			
SUBJEC	-l:	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eium all correspo	ndence concerning this matter	to the following:			
		DIEGO FIGUEROA				
			Name of Person			
		E&F LATIN GROUP LLC				
			Firm/Company			
		1820 N CORPORATE LA	KES BLVD STE 109			
			Address			
		WESTON FL 33326				
		<u> </u>	City/State and Zip Code			
		DIEGO@EFLATINACCOUNTING.COM				
		E-mail address: (to be used for future annual report notif	ication)		
For furt	her information o	oncerning this matter, please c	all:			
DIEGO	FIGUEROA		954 3848565 at ()			
	Name o	of Person	Area Code Daytimo	c Telephone Number		
Enclose	d is a check for t	he following amount:				
買 \$25	0.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
	Malling Adden		Street Address:			

Malling Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ENDOSCOPE AND BIOMEDICAL ADVANCED SER				
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our record bility Company)	1.)	·	
The Articles of Organization for this Limited Liability Company w	ere filed on <u>03/22/2022</u>	;	and assigned	
Florida document number L22000117973				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC	or the abbrevia	ation "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)		<u> </u>		-
				_
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>enter</u>	the name of	the new regis	<u>tered</u>
		-	202	
Name of New Registered Agent:	<u> </u>		2) (1)	
New Registered Office Address:	Enter Florida street addre.	n .	70 77	~~
		lorida	P (5)	₹0¥
	City	Z	in Gode	:-
New Registered Agent's Signature, if changing Registered Agent:		, <u>, , , , , , , , , , , , , , , , , , </u>	30	
				Labor

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>	Name	Address	Type of Action
MGR	JOHN HERNANDO BARRERA	19517 SUNSET BAY DR	
		LAND O LAKES, FL 34638	□Remove
			□Add
			□Remove
			Change
			□ Remove
			Change
			Change
			□ Romove
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			□Add
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Effective date, if other t	date must be speci	fic and cannot be r	orior to date of filin	ng or more than 90	(optional) days after filing.) Pur	suant to 605.0207 (
Note: If the date inserted document's effective date	n this block does	not meet the ap	plicable statutor	y filing requiren	ents, this date will	not be listed as ti
gotulielle 3 elitetive date	n die Schaine.		• • • • • • • • • • • • • • • • • • • •			
ne record specifies a delayed	effective date, b	ut not an effectiv	ve time, at 12:01	a.m. on the carl	ier of: (h) The 90	th day after the
ord is filed.						
HINE 20		2022				
		,	·			
Dated JUNE 20						
Dated		ر در میر _{از} میسی دهی	مستسمد.			

Filing Fee: \$25.00