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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Buenos Aires Multiservice LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marcelo W. Javier Jimenez
Name of Person

Firm/Company

4109 NW 88th. Ave. Apt. 202
Address

Coral Springs, FL 33065
City/State and Zip Code

Jimenez.jjn35@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Estrella Viniachi
Name of Person

at (786)
Area Code

387-2134
Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$25.00 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 Address:

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**

APPROVED
AND
FILED

Buenos - Aires Multiservice LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

2022 OCT 18 PM 4:12

The Articles of Organization for this Limited Liability Company were filed on 06/07/2022 and assigned
Florida document number L22000260465.

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:

4109 NW 88th. Ave., Apt 202

Enter Florida street address

Coral Springs
City

Florida

33065

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Natalia J. Angarano	8000 SW 21st Ct	☐ Add
		Miramar, Fl 33025	☒ Remove
			☐ Change
AMBR	Kiara N. Jimenez	8000 SW 21st. Ct.	☐ Add
		Miramar, Fl 33025	☒ Remove
			☐ Change
AMBR	Estrella Viniachi	4109 NW 88th. Ave, Apt 202	☒ Add
		Coral Springs, Fl 33065	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 11th. , 2022

[Signature]

Marcelo W. Javier Jimenez

Typed or printed name of signee

Filing Fee: \$25.00