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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PETER MATHISON LLC Account Number : I20210000152

Phone : (305)520-9343 Fax Number : (786)705-2040

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WORLD STONE USA LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT: WORLD	O STONE USA LLC		
		nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	FERNANDO VILLARRE	EAL	
		Name of Person	
	PETER MATHISON LLC	•	
	-	Firm Company	
	800 SE 4TH AVENUE, S	UITE 139	
		Address	
	HALLANDALE BEACH	, FL 33009	
		City/State and Zip Code	
	INFO@TUCONTADORE	NMIAMI.COM to be used for future annual report not	(Nonting)
For further informatio	n concerning this matter, please c	·	illenion)
P-P-4-3-1 - 3-7-5-5-3-5-4-1 - 3-7-5-5-1			
FERNANDO VILLA	e of Person	at (305) 520-9343 Area Code Daytim	ne Telephone Number
		·	·
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Cot The Centre of T 2415 N. Monro Tallahassee, FL	porations Fallahassee e Street, Suite 810

WORLD STONE USAILLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

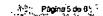
(Name of the Limited Linb) (A Florie	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number <u>L22000280147</u>	Company were filed on 06/20/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
ASPEN INVESTMENTS LATAM LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the at	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	d office address on our records, <u>enter the nam</u>	
	Enter Florida arcet address	202
	, Florida	Zip Code . J
	Cuy	Zip Code 💝 🕟
New Registered Agent's Signature, if changing Registere	ed Agent:	Co .
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, and I am f gent as provided for in Chapter 605, F.S. Or, ed office address, I hereby confirm that the lin	amiliar with and if this document is
	If Changing Registered Agent, Signature of New Res	istered Agent

显 4 of 6

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

Title	<u>Name</u>	Address	Type of Action
MGR	ALARCON DIAZ, SEBASTIAN A	800 SE 4TH A VENUE	≅ Add
	SUITE 139	□Remove	
		HALLANDALE BEACH, FL 33009	□ Change
MGR MUNOZ MUNOZ, JORGE R	800 SE 4TH AVENUE		
	SUITE 130	Remove	
		HALLANDALE BEACH, FL 33009	
AMBR	BASTIAS MONETTA, MONICA C	\$00 SE 4TH A VENUE	□Add
		SUITE 139	
		HALLANDALE BEACH, FL 33009	
AMBR	AMBR CAMACHO SAAVEDRA, ANA M	800 SE 4TH AVENUE	≣Add
	SUITE 139	Remove	
	HALLANDALE BEACH, FL, 33009	□ Change	
		□ Add	
		□ Remove	
		Change	
		🗆 Remove	
			□ Change



II AM	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	
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-	
Vote:	ive date, if other than the date of filing:
recor i is ti	d 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 led.
ated	29TH DAY OF NOVEMBER . 2022
	JORGE MUÑOZ Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	MUNOZ MUNOZ, JORGE R
	Typed or printed name of signee

Filing Fee: \$25.00