8/10/22, 4:48 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*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 HABITANTO LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Habitanto LLC		
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 06/22/2022	and assigned
Florida document number L22000281962		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi	ce 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:		- SS
New Registered Office Address:		
the Artic grant of Tributanian	Emer Florida street address	20 X 20 Z
	. Florida	
	City	Žip Chae

## 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 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	MARCELO DAVID HURTADO ARGUELLO	2330 PONCE DE LEON BLVD	
		CORAL GABLES, FL 33134	■ Remove
MGR	JORGE ESTEBAN MEJIA RIVADENEIRA	2330 PONCE DE LEON BLVD	■Add
		CORAL GABLES, FL 33134	□ Remove
			□Change
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fective date, if other than the date n effective date is listed, the date must be s	specific and cannot be prior t	o date of filing or more	than 90 days after filing	.) Pursuant to 605.020
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current is effective and on the separate	ment of blate is rooted.			
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August 10th	2022  Low nature of a member or author		a member	

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