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(Re	equestor's Name)	
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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Cor	porations		•		
	BINET SOLUTIONS LLC			•	
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	FREDDY GONZALEZ				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	ELITE CABINET SOLUT	TONS LLC			
		Firm/Company			
	30 NW 47TH COURT			22 S	TAISION CL. CESTCHALION
		Address		1- d3S	
	MIAMI, FL 33126			<u></u>	
	-	City/State and Zip Code	 	PM 2	1
	FREDDYGONZALEZ0610	- 		2:	2.5
	E-mail address: (to be used for future annual report notif	ication)	0	-
For further information co	oncerning this matter, please c	all:			
FREDDY GONZALEZ		786 674-9881 at ()			
Name of	Person		Telephone Number	-	
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing For Certificate of S Certified Copy (additional copy is	tatus &	
Mailing Address Registration S		Street Address: Registration Sec	ction		
Division of C		Division of Corp			

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

ELITE CABINET SOLUTIONS LLC

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

(A Florida Limited	Liability Company)	<u>11 us.</u>)
The Articles of Organization for this Limited Liability Company	y were filed on 08/01/2022	and assigned
Florida document number L20000337351		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADDRESS)		SE SE
		— C
Enter new mailing address, if applicable:		- 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19
		, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
(Mailing address MAY BE A POST OFFICE BOX)		5 ;
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, ent	er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
	,	FloridaZip Code
-34 1	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag		

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	FREDDY GONZALEZ	30 NW 47TH COURT	□Add
		MIAMI, FL 33126	□Remove
			■Change
	AIDELYN CARDENAS	30 NW 47TH COURT	□Add
		MIAMI. FL 33126	≣Remove
		-	□Change
			2 Remove
			· •
			P Single
			□Add
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			□Change

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ctive date, if other than the date of filing:) Pursuant to 605.020 will not be listed a
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The filed.	e 90th day after the
d 08/25/2022	
Signature of a member or authorized representative of a member	

Filing Fee: \$25.00