Division of Corporations

page 1

Florida Department of State Division of Corporations Electronic Filing Co

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		GHT 1. L. C.			
(Name of the Limite)	d Liability Compa A Florida Limited I	ny as it now appears on classifity Company)	our records.)		
The Articles of Organization for this Limited Lia	bility Company	were filed on		and assigne	d
Florida document numberL22000382990	<u> </u>				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of	the limited lish	ility company here:			
The new name must be distinguishable and contain the wo	rds "Limite¢ Liubil	ity Company," the designa	nion "LLC" or the	ehbrevission (B. C."	
Enter new principal offices address, if applica	ble:				}
(Principal office address MUST BE A STREET	ADDRESS)	2090 W Preserve	Way, apt 201	28	
	-	Miramar, Fl 3302;	5	111-41 TO	
Enter new mailing address, if applicable:		2007 111 D		5. 15 49 49 49 49 49 49 49 49 49 49 49 49 49	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	2090 W Preserve V			
		Miramar, Fl 33025	,		
B. If amending the registered agent and/or reagent and/or the new registered office address		ddress on our record	ds, <u>enter the na</u>	me of the new reg	<u>ristered</u>
Name of New Registered Agent:	Metzli Ro	odoli Contreras			
New Registered Office Address:	8540 NW	66TH ST AP-134835			
		Eiver Florida sti	eet address		
	Miami		Florida _	33195	
		Cry		Zip Code	
New Registered Agent's Signature, if changing Re	gistered 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 m	anage, enter the title, name, and address of each person b	
or removed from our records:	enter the tipe hame, and address of each person b	<u>seing added</u>

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			IRemove
			DChange
			Dadd
			DRemove
			□Change
			
			□Remove
			⊡Add
			⊡Reniov e
			□ Change
			Dadd
			□Remove
			GCIange
			EAdd
			©Remove
			DChange

. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
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Note: If the	tate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 to date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
he record spe ord is filed.	cities a delayed effective date, but not an effective time, at 17:01 a.m., on the earlier of: (b). The 90th day after the
Dated	December, 05 2022
	of For Clin
_	Signature of a member he authorized representative of a member
	NELSON COLON
	Typed or printed name of signee