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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : L2 PARTNERS, LLC  
Account Number : I20160000059  
Phone : (786)400-8184  
Fax Number : (786)522-2512

2019 OCT 10 PM 12:01

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**\*\*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  
6LA PARTNERS, LLC**

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### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 6LA Partners, 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:

Irene Viera  
Name of Person

L2 Partners, LLC  
Firm/Company

1790 SW 22 St., 1st Floor  
Address

Miami, FL 33145  
City/State and Zip Code

Irene.Viera@L2Partners.com  
E-mail address: (to be used for future annual report notification)

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 RECEIVED  
 DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Irene Viera at (786) 522-4476  
Name of Person Area Code 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/COURIER ADDRESS:**  
 Registration Section  
 Division of Corporations  
 Clifton Building  
 2661 Executive Center Circle  
 Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

6LA Partners, LLC

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

The Articles of Organization for this Limited Liability Company were filed on September 26, 2019 and assigned Florida document number L19000236081

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:**

\_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

City

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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Articles of Amendment  
To  
Articles of Organization  
Of  
6 LA PARTNERS, LLC


FL SOS Number L19000236081

Addendum Insert for Part D

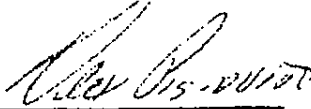
The Limited Liability Company intends to do business in Tennessee and qualify for the "obligated member entity" exemption from Tennessee's franchise and excise tax under T.C.A. §67-4-2008(a)(9). Raimundo Lopez-Lima Levi and Alexander Pls-Dudot are the sole members of the Limited Liability Company. Each such member and any future member (each an "obligated member") as a condition of becoming a member must execute the Articles of Organization and any additional documentation that may be required or appropriate for filing in Tennessee electing to be personally liable for all of the debts, obligations and liabilities of the Limited Liability Company (arising from contract, tort or otherwise) to the same extent as a general partner in a general partnership. No person shall become a member of the Limited Liability Company until executing such papers and the appropriate filing with the Tennessee Secretary of state. In the event that an amendment is made to these Articles of Organization striking the joint and several personal liability of any one of the members, then such amendment shall strike the joint and several personal liability of all members.

This addendum may be executed in several counterparts with the same effect as if the parties executing the several counterparts had all executed one counterpart.

The undersigned constitute all of the members of the Limited Liability Company.

  
\_\_\_\_\_  
Raimundo Lopez-Lima Levi

Date: October 10, 2019

  
\_\_\_\_\_  
Alexander Pls-Dudot

Date: October 10, 2019