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		Division of Co		Φ
		Fax Number	: (850)617-6383	AA A
	From:			==
		Account Name	: ARIMIR SERVICES GROUP LLC	
		Account Number	: 120200000022	<u>`~`</u>
			: (305)298-6579	
		fax Number	: (305)643-5225	

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

Email Address: a(INILServices @ grail. COM

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Certificate of Status	0
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2022 DE COMMUNICAS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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CODE A ESTMENTS, FIC				73 ***
(Name of the Lin	mited Liability Co	mpany as it now appears ited Liability Company)	an our records,)	and assigned
	(A COURT EILE	ned Disbinty Company)		EC THE
The Articles of Organization for this Limited	Liability Comp	any were filed on $\frac{02/1}{1}$	5/2007	and assigned.
Fiorida document number L07000017670				
	·			圣川·27
This amendment is submitted to amend the fo	llowing:			· · · ·
A. If amending name, enter the new name	of the limited l	iability company har		ت'
The Dames of the State of the S	We the highest h	iabinty company nero	<u>.</u>	
The new name must be distinguishable and contain the	manda of turbed f	intelligence of the state of th		
The new mane toust or distinguishable and contain the	words Linkled Li	lability Company, the desi	ignation "ULC or the abbreviat	non "L.L.C."
Enter new principal offices address, if appli	icable:			<u>-</u>
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>			
Enter new mailing address, if applicable:		7855 NW 12TH S	T STE 214	
r · · · · ·	: nav	DORAL FL 33126		
Mailing address MAY BE A POST OFFICE	<u>BUA)</u>			
				
M. II amanging the decreased and a section				
B. II amending the registered agent and/or tagent and/or the new registered office addre	registerea omici :88 here:	e address on our reco	rds, enter the name of th	e new registered
Name of New Registered Agent:	ARISTIDES	FERNANDEZ		
Name of New Keylored Agent.				
New Registered Office Address:	7855 NW 127	TH ST STE 214		
		Enter Fiorsda	street address	
	DORAL		, Florida 33126	
		City	71.0	- da

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

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Thu and

_ □ Change

□Add

□Remove

_ 🗆 Change

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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 = 1 $AMBR = 1$	Manager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
AMBR	ALFONSO VARGAS	2691 DAVIE BLVD	
		FT LAUDERDALE FL 33312	□Remove
			: Change
			□Add
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f the recor	rd specifies a delayed led.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated	DECEMBER 28TH	2022	
	——————————————————————————————————————	Signature of a member or authorized representative of a member	
	t turt kates mit		
	LUCIANO DIA	Typed or printed name of signee	