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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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FAIREN OF CORPORATION

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COVER LETTER

TO: Registration So Division of Cor				
	HOLDINGS, LLC.			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LUIS MACHADO			
	·	Name of Person		
	COUGAR HOLDINGS, L	LC.		<i>∾</i> :
		Firm/Company		2 A!
	305 ALCAZAR AVE SUI	TE 3		22 NUG 26 PM 12: 04
		Address		5 P
	CORAL GABLES, FL 331	34		PM 12: 04
		City/State and Zip Code		5
	jpilar@renegadeinvest.com			_
	E-mail address: (to be used for future annual repor	t notification)	
For further information of	oncerning this matter, please ca	all:		
Luis Machado		305 447-177		
Name o	f Person	Area Code D	aytime Telephone Number	
Enclosed is a check for the	he 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 Certificate of Certified Co (additional cop	of Status &
Mailing Addres Registration		<u>Street Addre</u> Registration		
Division of C	Corporations		Corporations	
P.O. Box 632	. /	i ne Centre	of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears of			
	ity Company)	1 our records.)		
The Articles of Organization for this Limited Liability Company were	and assign	and assigned		
Florida document number L07000053946				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	company here:	,		
he new name must be distinguishable and contain the words "Limited Liability C	ompany," the desig	nation "LLC" or the	e abbreviation "L.L.C	
Enter new principal offices address, if applicable:	<u>-</u>			
Principal office address MUST BE A STREET ADDRESS)				<u> </u>
			AUG	
			26	- 55 - 55 - 55
Enter new mailing address, if applicable:				<u> </u>
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	<u> </u>
_			5 1	<u>_</u>

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>	Address	Type of Action
MGR	Antonio Gestido, Jr.	6073 N.W. 167th Street Unit C-1	= Add
		Miami, Florida 33015	□Remove
			□ Change
			□Add
			Remove, IVISION TAN
			☐ Change
			□Remove
			□Change
			Change
			🗆 Add
			□Remove
			□Change

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fective date, if other an effective date is listed, to the listed in the date inserted becament's effective date.	he date must be spec d in this block doe	ific and ca s not me	innot be prior t et the applica	o date of filing ble statutory	or more than 90 filing requirer	(optional days after filing ments, this date	g.) Pursuant to 60)5.020 sted a
ecord specifies a delayous filed.	ed effective date, b	out not ar	i effective tir	ne, at 12:01 a	i.m. on the ear	lier of: (b) T	he 90th day aft	er th
August 19,			2022					
		· ·		- ·				
	Signatu	re of a me	mber or autho	rized represent	ative of a meml	oer		
· 								

Filing Fee: \$25.00