5/16/22, 3:22 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001744513)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & PARTNERS, P.A.

Account Number : I20110000091 Phone : (305)858-9900 Fax Number : (305)285-0015

\*\*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 FARALA HOLDINGS, LLC

0 Certificate of Status Certified Copy 04 Page Count \$25.00 Estimated Charge

7. 3

## ARTICLES OF AMENDMENT TO . . . . . ARTICLES OF ORGANIZATION OF

FARALA HOLDING		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)  oility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L08000030767	ere filed on <u>03/26/2008</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty 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 ad	dress on our records, enter the	name of the new register
agent and/or the new registered office address here:		022 H
Name of New Registered Agent:		AY FI
New Registered Office Address:	Enter Florida street address	
- <del>-</del>	, Flori	da Code
		. 8

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 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>	Name	<u>Address</u>	Type of Action
<u>i ide</u>	Name	Address	1 spc of rection
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			Петюvе
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Capital contribution	ons in the amount of \$1,000.00 cash shall be paid to the limited liability company
by the member as	follows:
RJFS TECH LIMI	TED PARTNERSHIP, a Nova Scotia, Canada limited partnership - \$1,000.00 / (100%)
<del>-</del>	
an effective date is used lose: If the date inser	d, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.07 red in this block does not meet the applicable statutory filing requirements, this date will not be listed date on the Department of State's records.
record specifies a de i is filed.	layed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
Dated	February 15 2022
	Fernan Radriquez

Filing Fee: \$25.00