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Division of Corporations

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: (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : 120000000083 Phone : (305)932-6262 Fax Number : (305)933-9393

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CAPE AYELEN LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Company as it now appears on a (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Li Florida document number L09000119580	ability Company were filed on 12/16	5/2009 and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of		2021 AU SECHA
The new name must be distinguishable and end with the	words "Limited Liability Company," the desig	mation "LLC" or the abbreviation VII.C."
Enter new principal offices address, if applic	able:	역한 6 T
(Principal office address MUST BE A STREE		
		- - Δ
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
B. If amending the registered agent and, registered agent and/or the new registered of	for registered office address on ou	r records, enter the name of the nev
Name of New Registered Agent:	Eduardo Francisco Odierno	
New Registered Office Address:	3801 S Ocean Dr Unit 8T	street address
	Hollywood	Florida 33019
	Cin:	Zip Cade

New Registered Agent's Signature, if changing Registered Agent:

CAPE AYELEN LLC.

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. The object confirm that the limited hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Miguel Sanchez	19501 W. Country Club Drive	9 _Cl Add
		702	景 Remove
		Aventura FL 33180	
MGR	Miguel Sanchez	19501 W. Country Club Drive	D Add
		702	■ Reinove
		Aventura FL 33180	
MGR	Eduardo Francisco Odierno	19501 W. Country Club Drive	e Blak ≡
		702	Remove
		Aventura FL 33180	_
			DbA =
			_D Remove
			_
			_□ Add
			B Remove
			_
			D Add
			_□ Remove

-		
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e effective date must be specific, cannot be prior c date this document is filed by the Florida Depo	r to date of receipt or filed date and cans	(optional) of be more than 90 days after
effective date must be specific, cannot be prior educities document is filed by the Florida Depoted August 20	r to date of receipt or filed date and cate artment of State) 2021	of be more than 90 days after
fective date, if other than the date of a effective date mass be specific, cannot be prior of date this document is filed by the Florida Deposited August 20 Signature Eduardo Francisco	r to date of receipt or filed date and cate artment of State) 2021 of a member or authorized representation	of be more than 90 days after

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