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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

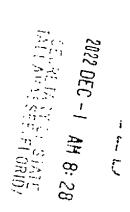
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CABBANI, FRANCISCO		
		Name of Person	
	F & R USA, LLC		
		Name of Person A, LLC Firm/Company th AVE UNIT 3103 Address Correspond And Corporations Address Correspond And Corporations Address Correspond And Corporations Address Correspond And Corporations Address Correspond Andress Address Address Address Address Correspond Andress Address Address Correspond Andres Address Address Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: CABBANI, FRANCISCO Name of Person F & R USA, LLC Firm/Company 3131 NE 7th AVE UNIT 3103 Address MIAMI FLORIDA 33137 City/State and Zip Code frunciscocubbani@gmail.com E-mail address: (to be used for future annual report notification) fformation concerning this matter, please call: FRANCISCO Name of Person Area Code Daytime Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed) Telephone Status & Certificat Copy (additional copy is enclosed)		
		ubmitted for filing. er to the following: ON Name of Person Firm/Company F 3103 Address 37 City/State and Zip Code .com s: (to be used for future annual report notification) er call:	
	MIAMI FLORIDA 33137		
		City/State and Zip Code	
	franciscocabbani@gmail.co	om	
	E-mail address: (to be used for future annual report notific	cation)
For further information c	oncerning this matter, please co	atl:	
CABBANI, FRANCISC	O		
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
☐ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Division of C P.O. Box 632	Section Torporations 7	Registration Sect Division of Corp The Centre of Ta	orations Illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F & R USA, LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited I Florida document number 1.10000028854					
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "LLC" or th	e abbreviation "L.L.C."		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3131 NE 7th AVE UNIT 3103			
		MIAMI FLORIDA 33137			
Enter new mailing address, if applicable:		3131 NE 7th AVE UNIT 3103 MIAMI FLORIDA 33137			
(Mailing address MAY BE A POST OFFICE			2022 D		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:		address on our records, <u>enter the n</u>			
Name of New Registered Agent:			AM B		
New Registered Office Address:	3131 NE 7th AVE UNIT 3103 Enter Florida street address): 28		
	MIAMI		33137		
		, Florida	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 t 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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Acti-
			□Add
•			□Remove
			□ Change
			□ Add
			□Remove
			Change
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Note: If th	late, if other than to a date is listed, the date in e date inserted in this seffective date on the	block does not	meet the applic	able statutory fili	more than 90 days after	t ional) er filing.) Pursuant to 60 nis date will not be lis)5.020 sted ;
e record spord is filed.	ecifies a delayed effec	tive date, but no	t an effective ti	ime, at 12:01 a.m	. on the carlier of: (b) The 90th day aft	ter t h
Dated NO	VEMBER 2ND		2022	·			
			·	 -			
		Signature of a	member or auth	orized representati	ve of a member		
				F			

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