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### **COVER LETTER**

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CUDICAT.	EQUI TER	RA, LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sui	emitted for filing.	
		ondence concerning this matter	_	
		HUMBERTO SPEZIANI		
			Name of Person	, ;
		EQUI TERRA, LLC	_	
			Firm/Company	<del></del>
		1400 NW 10TH AVENUE	E 205P	
			Address	·
MIAMI, FLORIDA 33136				
			City/State and Zip Code	· ;
		SEG153@MIAMI.EDU	<del></del>	
For further in	formation c	E-mail address: ( oncerning this matter, please o	to be used for future annual report no all:	tification)
SUSAN GO	NZALEZ		305 243-3916	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a	check for th	ne following amount:		
<b>■ \$</b> 25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ling Addres		Street Address: Registration So	ection
Div	ision of C	orporations	Division of Co	
<del>-</del>	. Box 632		The Centre of	Tallahassee
1 211	ahassee, F	L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EQUI TERRA, LLC			
(Name of the Limited Lia (A Flor	bility Company as it now appears on our records. rida Limited Liability Company)	)	
The Articles of Organization for this Limited Liability Company were filed on 07/08/2010		and assigned	
Florida document number L10000072381			
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	mited liability company here:	,,,	
he new name must be distinguishable and contain the words "L	imited 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 AD	DRESS)	- 0	
		(-)	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or register gent and/or the new registered office address here		<u>te name of the new regist</u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Enter riorida sir <del>e</del> el address		
	, Flor	ida	
	City	ap coue	

### 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	PATRICK CASEY	1400 NW 10TH AVENUE 212 MIAMI, FL 33136	□Add
		<del></del>	Remove
			Change
MGR	RAFIC S. WARWAR	1400 NW 10TH AVENUE 205P MIAMI, FL 33130	5 <b>⊟</b> Add
		<u> </u>	□Remove
		<del></del>	Change
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Note: If the date	if other than the date of is listed, the date must be speci inserted in this block does tive date on the Departmen	not meet the appli	icable statutory tilii	(optionore than 90 days after the grequirements, this	onal) r tiling.) Pursuant to 6 s date will not be li	05.0207 sted as
	cifies a delayed effect y after the record is f	ive date, but n ìled.	ot an effective	time, at 12:01 a	a.m. on the ear	lier o
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ne record spec The 90th da	March 9	2023	<u> </u>			
The 90th da	March 9					

Page 3 of 3

Filing Fee: \$25.00