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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

Email	Address:					
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

LAS VEGA FORTUNA LLC

Certificate of Status	0
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OCT 3 1 2022

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

Las Vega Fortuna LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	bility Company were filed or	11/04/2010	and assigne	ed
Florida document numberL10000115203	· · · · · · · · · · · · · · · · · · ·			
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability compan	y here:		
The new name must be distinguishable and contain the wo	rds "Limited Liability Company,"	the designation "LLC" or the	abbreviation "L.1. C.	••
Enter new principal offices address, if applica	ble:			·
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>			
			7022	
B. If amending the registered agent and/or re agent and/or the new registered office address	gistered office address on o <u>here</u> :	ur records, <u>enter the na</u>	me of the new re	egistered
Name of New Registered Agent:	Eitan Zohar		- P	<u> </u>
New Registered Office Address:	6135 NW 167 Street	E-27 Florida street address	2: <b>08</b>	
	Hialeah		33015	
	City	, Florida _	Zıp 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 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.

> Eitan Zohar 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>	Name	<u>Address</u>	Type of Action
MGRM_	AIGES, SAMUEL	6135 NW 167 Street	□Add
		E-27	⊠Remove
		Hialeah, FL 33015	
			□Add
			□Remove
			□Change
			□Add
		<u>.</u>	□Remove
			□Change
			□Add
			□Remove
			□Change
*			Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
			Remove
			□ Change

<del>,</del>	
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Effective dat	te, if other than the date of filing:
Note: If the o	late inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
document's e	ffective date on the Department of State's records.
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ord is filed.	
Dated	October 27 2022
	October 27 . 2022
_	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	Morgan Noble
	Morgan Noble Typed or printed name of signee

Filing Fee: \$25.00