11000066670

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JUNI 16 PM b. is ;
SECRETARY OF STATE

COVER LETTER

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Tallahassee, FL 32314

TO: Registration S Division of Co					
TATE 812					
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	DANIELA BALDOVINO				
		Name of Person			
	UNTITLED SEC				
		Firm/Company			
	1801 NE 123RD STREET				
		Address			
	SUITE 307 NORTH MIA	MI. FL 33181			
		City/State and Zip Code			
	DANIELA.BALDOVINO	@UNTITLED-SLC.COM to be used for future annual report notif	tent, and		
For further information	concerning this matter, please c	·	(China)		
DANIELA BALDOVINO		786 899,4374			
Name	of Person	at () Area Code Daytime	e Teleptione Number		
Enclosed is a check for	the following amount:				
☐ \$25.00 Filing 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 radditional copy is enclosed		
Mailing Addre		Street Address:			
Registration Division of	Section Corporations	Registration Sec Division of Cor			
P.O. Box 63		The Centre of Tallahassee			

2415 N. Monroe Street, Suite §10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

FILED

TATE 812 LLC

· · JUN 16 PM b. Ist:

(Name of the Limited Liability Company as it now appears on our rate of the Limited Liability Company)

(A Florida Limited Liability Company)

TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L11000066670 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cin 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. Thereby 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	GRINBERG, ROMINA	9349 Collins Av apt 603	
		Surfside, FL 33154	
		USA	
MGR	UNTITLED MANAGERS LTD.	Casablanca House, Luck Hill	
		Road Town, Tortola	
		British Virgin Islands	
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fective	edate, if other than the	he date of filir	ng:			(optional)	
an effecti ote: If	ive date is listed, the date if the date inserted in this	ust be specific an block does not	id cannot be prio meet the annli	r to date of filing of cable statutory t	or more than 90 da iTing requiremen	ys after filing.) Pr its (this date wil	rsuant to 605,020 Lnot be listed a
	t's effective date on the						
	specifies a delayed effec	tive date, but no	ot an effective	time, at 12:01 a.	m, on the earlie	rof: (b) The 9	Ith day after the
is filed							
20	DAY OF APRIL		2022				
ated	DAY OF APRIL			<u> </u>			
aicti				خرتينتن			
aicti			تعديم	17			
aicti		Signature of a	i member or auti	norized representa	tive of a member		<u></u> _