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COVER LETTER

Divi	sion of Corpo	orations	•			
SUBJECT:	Tlon LLC		× .	••		
ocholen.		Name of Limit	ted Liability Company			
.The enclosed	Articles of Ar	nendment and fee(s) are subn	nitted for filing.	•		
Dlagea raturn	all correspond	lence concerning this matter t	o the following:		•	,
. I lease letuin	an correspond	tence concerning this matter to	· ·			
		Eduardo Ayala Maura			•	
			Name of Person			
		Ayala Law PA				
			Firm/Company			
		1390 Brickell Ave, Suite 33	35			
			Address			
		Miami, FL 33131				· · · · ·
			City/State and Zip C	ode .		
		lawayala@gmail.com				
	: .	E-mail address: (to	be used for future and	nual report notifica	tion)	
For further inf	formation con	cerning this matter, please cal	11:		* % · *	
Eduardo Aya	la Maura		305	570-2208		
	Name of P	erson	Area Code	Daytime To	elephone Number	· · ·
Enclosed is a	check for the	following amount:	••			*
\$25.00 Fi		S30.00 Filing Fee & Certificate of Status	\$55.00 Filing F Certified Copy (additional copy i	у	Certified (of Status &

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tion LLC	•			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our record Liability Company)	<u>rds.</u>)		
The Articles of Organization for this Limited Liability Comparison document number	ny were filed on	· .	_ and ass	signed
This amendment is submitted to amend the following:			•	
A. If amending name, enter the new name of the limited li	ability company here:		•	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "Ll	C" or the abbre	viation "L	L.C."
Enter new principal offices address, if applicable:		*	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		77
		ASS		Section 1
	,	13. C	8	,
Enter new mailing address, if applicable:		FES	ָּס	1
(Mailing address MAY BE A POST OFFICE BOX)		SA	W	
muning unitess MAT BE AT OST OFFICE BOX	······	D ri	2	
		.		
		ds, <u>enter th</u>	e name	of the
Name of New Registered Agent:		ds, <u>enter the</u>	e name	of the
registered agent and/or the new registered office address h			e name	of the
	<mark>ere:</mark> Enter Florida street addr			of the

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	Hector Omar Tonante	_	247 SW 8TH STREET #844	Add
			Miami, FL 33130	. Remove
				□ Change
MGR	Maria Tonante		247 SW 8TH STREET #844	Add
			Miami, FL 33130	□ Remove
		٠.	· · · · · · · · · · · · · · · · · · ·	☐ Change
				□ Add
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			<u> </u>	□ Remove
				☐ Change

amending any other inf	ormation, enter change(s) here: (Attach additional sheets,	if necessary.)
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te: If the date inserted in	n the date of filing: the must be specific and cannot be prior to date of filing or more than 90 daths block does not meet the applicable statutory filing requirement the Department of State's records.	_ (optional) ays after filing.) Pursuant to 605.02 nts, this date will not be listed a
record specifies a de he 90th day after th	layed effective date, but not an effective time, at 12 e record is filed.	2:01 a.m. on the earlier
ed	, 2016	
	(deceneral	AR TO
	Signature of a member or authorized representative of a member	S. 73
	HANAGER	The second secon
	Typed or printed name of signee	D 3: 2 STAT FLORE
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