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2022 JUL -5 PH 2: 08

SEP 2 7 2022 S. PRATHER

COVER LETTER

TO: Registration So Division of Con			
Domotics I. SUBJECT:	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Roman Martinez		
		Name of Person	
	Roman Martinez		
	-	Fim/Company	
	19380 NE 26TH AVE #2	05	
		Address	
	Miami Florida 33180		
	roclama@gmail.com	City/State and Zip Code	
		to be used for future annual repor	t notification)
For further information c	concerning this matter, please c	all:	
Roman Martinez		305417-	
Name c	of Person	at () Area Code Di	aytime Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Addres	
Registration : Division of C			Corporations
P.O. Box 632	27	The Centre	of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Domotics LLC		1022 ALL
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	1022 JUL
The Articles of Organization for this Limited Liability C Florida document number L11000111661	Company were filed on <u>09/29/2011</u>	and assigned
This amendment is submitted to amend the following:		2: 08 2: 17:12 80 : 2
A. If amending name, enter the new name of the lim	nited liability company here:	
Coffee 36 LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter the n</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	i
	City	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 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 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	Address	Type of Action
MGR	Kennedy Jennifer	19380 NE 26TH AVE APT205 miami Fl 33180	□Add
			≣Remove
			□Change
			□Add
			🗀 Remove
			□Change
			□Add
			□Remove
			□Change
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Signature of a member of	Authorized representa	tiye of a member		(四) (四) (四)
Roman Martinez				(11) (11)
Typed or		·e		

Filing Fee: \$25.00