L11000134965

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Gladiator So	CCURE LLC.	
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Senia	Name of Person	
	X-tr.	avit, LLC. Firm/Company	2021
	13000 GW 13	53 CT Address	-8 T
	Miami, FL Senia@nov E-mail address:	City/State and Zip Code OtrenzaCon to be used for future annual report noti	PH 2: 35
For further information co	oncerning this matter, please c		
Senia Ta	D. Q.	at (<u>305</u>) <u>934</u> — Area Code Daytini	9952 e Telephone Number
Enclosed is a check for th	e following amount:		
X \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	<u>s:</u>	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Glaciator Secur (Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number <u>L. 1100013491</u> . This amendment is submitted to amend the following:	empany were filed on $11/29/2011$ and assigned 5
A. If amending name, enter the new name of the limit	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13000 SW 133 CT
(Principal office address MUST BE A STREET ADDRI	Miami, FL BB186
	-:17
	0 1
Enter new mailing address, if applicable:	13000 SW 133, BT 111
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33 NON
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	rianna Ortiz
New Registered Office Address:	13000 SW 133 CT. Enter Florida street address
	Miami Florida 33186
	City Zip Code
Naw Dagistared Apart's Signature if changing Dagistared	Avants

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>	Name	Address	Type of Action
MGR	Julian Tang	16513 SW 59 Terrace	🗆 Add
		Micmi, FL 33193	Remove
			□ Change
MGR	Arianna Ortiz	13000 SW 133 CT.	:X Add
		Micrai, FL 33186	
		SERRITAL SEE THE	2001 Change JAN DAdd Phinkemove Change
			🗆 Add
			□Remove
			[] Change
	-		□Add
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Signature of a member or authorized representative of a member	<u>2021</u> .	
	of a member or authorized representative of a member	

Filing Fee: \$25.00