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## **COVER LETTER**

TO: Registration Solition of Col				
SUBJECT:	Name of Limi	earl Trobert;	es UC	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Martina	Name of Person		
		Firm/Company	<del></del>	
For further information c	1720 +  HOlywo  HY37499  E-mail address: (to)  concerning this matter, please ca	Address  Cd F 330  City/State and Zip Code  O be used for future annual report notificate	020 M ion)	2021 DEC -2 PH 6: 58
Martina Name o	Velet Person	at ( <u>305</u> ) <u>7-60</u> — Area Code Daytime Te	7007 Jephone Number	_
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status & py
Mailing Address Registration S Division of C P.O. Box 632	Section 'orporations	Street Address: Registration Section Division of Corpor The Centre of Talk	ations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carot	Oco as de	Probables 11C
(Name of the Limited	d Liability Compa A Florida Limited I	ny as it now appears on our records.) hability (ompany)
The Articles of Organization for this Limited Lia Florida document number 12 000 138.  This amendment is submitted to amend the follows:	bility Company	
A. If amending name, enter the new name of	· ·	ility company here:
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation "L.I.C" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		1720 Harrison St, 7 fl
(Principal office address MUST BE A STREET ADDRESS)		Hollywood, Florida, 23020
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		1720 Harison 51, 74 Hollywood, 71, 33020
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our records, enter the name of the new registered
Name of New Registered Agent:	Martine	
New Registered Office Address:	08 FL	Harrison & 7 Hi
		Circ Florida 33025
New Registered Agent's Signature, if changing Re		
Thereby accept the appointment as registered	agent and agre	ze to act in this capacity. I further agree to comply with 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>	<u>Address</u>	Type of Action
AMBR	Martina Velez	1720 Harison, 7 H Hollywood, Fl, 33020	X/vqq
		Hollywood, +1, 33020	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable	ate of filing or more than 90 days after filing.) Pursuant to 60	
rument's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective time.	at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
s filed.		
ed 12 Dec . 2021.		
ed 12 Dec 2021.  Martina Ull	10.0	
	LU	

Filing Fee: \$25.00