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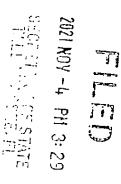
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| (Requestor's Nam | ne) |
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| Certified Copies Certifica | ates of Status |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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Y. SCOTT NOV 1 4 2021

COVER LETTER

| TO: Registration So Division of Cor | | | |
|--|--|---|--|
| GERMAS SUBJECT: | LLC | | |
| SUBJECT: | Name of Lin | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub- | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | SANDRA B. MASSO | | 2021 |
| | | Name of Person | |
| | PEAK CORP | | |
| | | Firm/Company | |
| | 2021 NOV -4 PM 3: 29 | | |
| | | Address | 317 |
| | Weston, Fl. 33326 | | |
| | | City/State and Zip Code | |
| | | to be used for future annual report not | ification) |
| For further information c | oncerning this matter, please c | all: | |
| Sandra B. Masso | | 305 282-8251 at (| |
| Name o | í Person | | ne Telephone Number |
| Enclosed is a check for the | ne 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 (additional copy is enclosed) |
| Mailing Addres Registration S | | <u>Street Address:</u> Registration Se | ction |
| Division of C | | Division of Cor | |
| P.O. Box 632 | | The Centre of T | |
| Tallahassee, I | L 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GERMAS LLC | | | | |
|---|--|---|--------------------------|----------------|
| (Name of the Lim | ited Liability Compa (A Florida Limited I | inv as it now appears on our reco Liability Company) | ords.) | |
| The Articles of Organization for this Limited I. Florida document number L13000003713 | iability Company | were filed on | | and assigned |
| This amendment is submitted to amend the fol | lowing: | | | 202 |
| a. If amending name, enter the new name of | of the limited liab | ility company here: | | 767 KOV - |
| he new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the designation "L | LC" or the abbrev | ation "L.L.C." |
| Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) | | 1555 N. TREASURE DRIV | E SUFIE 512 | |
| | | NORTH BAY VILLAGE FI | L,3314II (|)) |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | | 1555 N. TREASURE DRIV | | |
| | | NORTH BAY VILLAGE FI | L,33141 | |
| 3. If amending the registered agent and/or gent and/or the new registered office addre | ~' | address on our records, <u>ent</u> | er the name of | the new regist |
| Name of New Registered Agent: | PEAK CORP | | | |
| New Registered Office Address: | 16475 Golf Clu | b Rd. Suite # 304 | | |
| | | Enter Florida street add | ress | |
| | Weston | | Florida ³³³²⁶ | |
| | | City | | lip 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 Changing Registered Agent, Signatufe 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 | VASQUEZ , JOSE A | 895 NW 132nd Ave | □Add |
| | | Hollywood Fl. 33028 | ■Remove |
| | | | □Change |
| MGR. | GERMAN VASQUEZ | 1555 N. TREASURE DRIVE STE 212 | □Add |
| | | NORTH BAY VILLAGE, FL. 33141 | Remove 22 |
| MGR | ALEJANDRO VASQUEZ | | Change January Addi |
| | | | S S S S S S S S S S S S S S S S S S S |
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| ffective date, if other than the | date of filing | g: | | | (optio | nal) | |
| an effective date is listed, the date must ote: If the date inserted in this blo | be specific and ock does not n | cannot be prior | to date of filing | g or more than 9 / filing require | 0 days after | liling.) Purst | iant to 605.020 or he listed as |
| ocument's effective date on the De | partment of S | tate's records | | ······g voquire | | | or the more to a |
| | | | | | | | |
| | date, but not | an effective t | ime, at 12:01 | a.m. on the ca | rlier of: (b) | The 90th | day after the |
| record specifies a delayed effective is filed. | | | | | | | |
| is filed. | | | | | | | |
| l is filed. | | 2021 | <u></u> | | | | |
| l is filed. | | 2021 | | | | | |
| ated | Ufay Signature of a n | Fare | / W.S.L. | native of a mem | ber | | |

Filing Fee: \$25.00