Division of Corporations Electronic Filing Cover Sheet

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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTADORMIAMI.COM INC

Account Number : I20200000130 Phone : (954)345-7888 Fax Number : (786)713-1940

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DATTOMA FAMILIA LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DATTOMA FA	AMILIA LLC		
(Name of the Limited Liability Company (A Florida Limited Liab	ns it now appears onlity Company)	in our records.)	
The Articles of Organization for this Limited Liability Company we	ere tiled on	04/05/2013	and assigned
Florida document number L13000050044			31VI 202 1
This amendment is submitted to amend the following:			SION SION
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation of the new principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			
	Company," the desi	gnation "LLC" or the abbr	reviation ALC Section ALL
• • •	<u> </u>		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here:	dress on our rec	ords, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	a street address	
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete position the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of m ovided for in Ch	y duties, and Lam fa apter 605, P.S. Or, ii	miliar with and Othis document is

If Changing Registered Agent, Signature of New Registered Agent

17867131940

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

H210003669543

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	DATTOMA, ALFREDO D	1549 NE 123 ST	□Add
		NORTH MIAMI, FL 33161	
			∐Change
MGRM	CONTESTABILE, BRIAN N	1549 NE 123RD ST	
		NORTH MIAMI, FL 33161	□Remove
			TChange
MGRM	DATTOMA, ANALIA D	1549 NE 123RD ST	LAdd
		NORTH MIAMI, FL 33161	JIVISION OF
			JIVISION OF CORPORATION Addition of Corporati
			□Remove
			DChange
			∐Remove
			☐ Change
			□Add
			iTRemove
			□Change

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Effective date, if other than the date of filing: (optional)		EASE ADD THE EIN NUMBER: 46-2491645		
Effective date, if other than the date of filing:				
Effective date, if other than the date of filing:	•			
Effective date, if other than the date of filing: [In effective date, if other than the date of filing: [In effective date it listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed. SEPTEMBER 29TH 2021				
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