8/1/22, 1:38 PM

H22000259013 3 Division of Corporations

Florida Department of State

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(((H22000259013 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAXLEAF, COM INC Account Number : I20140000084 Phone : (305)541-3980 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:___

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Page: 3 of 5

2022-08-01 18:00:04 GMT

17867131940

From: TAXLEAF.COM CONTADORMIAMI.COM

H22000259013 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAMARACOL LI	LC		
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears or Company)	our records.)	
The Articles of Organization for this Limited Liability Company were f	iled on	7/23/2013	and assigned
lorida document number <u>L13000103622</u>			
his amendment is submitted to amend the following:			
x. If amending name, <u>enter the new name of the limited liability co</u>	mpany here:		
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the desig	nation "LLC" or the a	abbreviation "L.U.C."
inter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	_ 		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office addres	5 AM AUF F ACO	ede anter the no	ma of the new regista
n. It amending the registered agent and/or registered office address agent and/or the new registered office address here:	YOU OUT TEEN	inds, enter the na	me in the new register
			74 S
Name of New Registered Agent:			22 A
•			
New Registered Office Address:	Euser Florida	street address	SS - 7
•	Ewer Florido		SEE
•		street address , Florida	SEE FLOOR

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

H22000259013 3 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

Title	<u>Name</u>	Address	Type of Action
MGR	KOTSIAS, JOSE A	2800 GLADES CIRCLE SUITE 104	
		WESTON, FL 33327	
			☐ Change
AMBR	ALI SANTORO, ANDRES	2800 GLADES CIRCLE SUITE 104	
		WESTON, FL 33327	
			□ Change
MGR	PERCARA, SANDRA	2800 GLADES CIRCLE SUITE 104	= Add
		WESTON, FL 33327	C Remove
			□ Change
MGR	AYECHU, JOSE	2800 GLADES CIRCLE SUITE 104	■Add
		WESTON, FI. 33327	□Remove
			∐Change
	_		D.Add
			□ Remove
			Change
			□Add
			⊑Remove
			[] Change

H22000259013 3

fective date, if other than the date of filing:						
He: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a cument's effective date on the Department of State's records. ecord 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 is filed. HILY 21TH 2022 Signature of a member or authorized representative of a member.						
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