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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTER-AMERICAN SERVICE GROUP LLC		
(Name of the Limited Linbility Comp (A Florida Limited	any as it now appears on our record Liability Company)	<u>.</u>
The Articles of Organization for this Limited Liability Company Florida document number L13000105403		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUSI BE A STREET ADDRESS)		2021
Enter new mailing address, if applicable:		7 5
(Mailing address MAY BE A POST OFFICE BOX)		3 2 10
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B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter (</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u>,</u>	/ " " " " " " " " " " " " " " " " "	rida
	City	Zip 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, 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>	Address	Type of Action
MGR	ANDRES MENDEZ	4424 NW 93 DORAL CT	🗀 Add
		DORAL, FL 33178	=Remove
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ective date, if other than the of effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	e specific and cannot be k does not meet the a	eprior to date of filing applicable statutory	t or more than 90 days alto	donal) er filing.) Pursumt to 605.0207 ais date will not be listed as
cord specifies a delayed effective s filed.	iate, but not an effec	tive time, at 12:01	a.m. on the earlier of: ((b) The 90th day after the
ed AUGUST 25	, 2021	·		
V 117 1				
	gnature of a memoer of	authorized represen	stive of a member	