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(((H22000080806 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARBOSA LEGAL Account Number : I20110000049 Phone : (305)501-4680 : (305)359-9543 Fax Number

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

Email Address: _____renewals@barbosalegal.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PACHITA LLC

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K. SALY

MAR - 4 2022

COVER LETTER (((H22000080806 3)))

TO: Registration S Division of Co			e e
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SUBJECT:		ind rinkiller Comment	
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Erika Kitaoka da Silva		
		Name of Person	
	Barbosa Legal		
		Firm/Company	
	407 Lincoln Road PH-NE		
		Address	
	Miami Beach, FL 33139		
		City/State and Zip Code	
	renewals@barbosalegal.com		
	E-mail address: (to be used for future annual report n	otification)
For further information	concerning this matter, please c	all:	
Erika Kitaoka da Silva		305 501-4680	
Name	of Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for	the 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)
<u>Mailing Addr</u> Registration		Street Address: Registration S	
	Corporations	Division of C	orporations
P.O. Box 63	27	The Centre of	
Tallahassee	, FL 32314	2415 N. Mon Tallahassee, I	roe Street, Suite 810 FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H22000080806 3)))

Pachita LLC				
(Name of the Limite	d Liability Compan A Florida Limited Li	y as it now appears on eability Company)	or records.)	
The Articles of Organization for this Limited Lie Florida document number L14000074421	ability Company v	vere filed on <u>05/07/2</u>	014 and assigned	
This amendment is submitted to amend the follo	wing:		, , , , , , , , , , , , , , , , , , ,	
A. If amending name, enter the new name of	the limited liabil	ity company here:		
N/A The new name must be distinguishable and contain the wo	orde "T imited T ishili	Transput the designs	tion "LLC" or the abbreviation "LLC"	
·		N/A	tion lie of the above viation 1.2.C.	
Enter new principal offices address, if applica				
(Principal office address MUST BE A STREET	T <u>ADDRESS)</u>			
Enter new mailing address, if applicable:		407 Lincoln Rd PH-1	νΈ	
(Mailing address MAY BE A POST OFFICE L	BOX)	Miami Beach		
		FL 33139		
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:		ddress on our recore	ls, enter the name of the new registered	
	407 Lincoln Rd	PH-NE		
New Registered Office Address:	Enter Florida street address			
	Miami Beach		, Florida 33139	
		Ciţi	Zip Code	
New Registered Agent's Signature, if changing R	egistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been notified in writing	er and complete p stered agent as p registered office o	performance of my c rovided for in Chap	luties, and I am familiar with and ter 605, F.S. Or, if this document is	

/S/ Andrés Hernandez

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 (((H22000080806 3)))

<u>Title</u>	Name	Address	Type of Action
MGR	JESUS E BENAVIDES	16425 Collins Avenue	□Add
		Apt 2714	≣Remove
		Sunny Isles, FL 33160	
MGR	LUIS ASPILLAGA	16425 Collins Avenue	≣ Add
		Apt 2714	□Remove
		Sunny Isles, FL 33160	□Change
			□Remove □Change □Change □Change □Change
			Add: C11 C11 C11 C11 C11 C11 C11 C11 C11 C1
			□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			□Change

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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the record specifies a delayed effect is filed.	nust be specific and cannot block does not meet the Department of State's r	applicable statutory ecords.	filing requirements, this	filing.) Pursuant to 605.0207 s date will not be listed as
a is thea.				
Dated March 02	2022	2		
	/S/Andrés Herna			
	Signature of a member	or authorized represen	itative of a member	
	Signature of a memoer	or admorated represent		

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Filing Fee: \$25.00