

10/11/23, 2:58 PM

Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

# L15000043181

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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : ALEX PINA CO.  
 Account Number : I20190000095  
 Phone : (305)803-8471  
 Fax Number : (305)602-3977

2023 OCT 11 PM 10:15

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

Email Address: client@alexpina.co

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FLORIDA  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS

TAX

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INTERNATIONAL DEALS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

STRO...  
 OCT 12 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTERNATIONAL DEALS LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/19/2015 and assigned Florida document number L1500043181

This amendment is submitted to amend the following:

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 "L.L.C."

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

7058 NW 77th Ct Ste 100 Miami, FL 33166

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

7058 NW 77th Ct Ste 100 Miami, FL 33166

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ALEX PINA CO. New Registered Office Address: 8400 NW 36TH ST STE 450 DORAL, Florida 33166

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.

[Handwritten Signature]

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>	<u>Address</u>	<u>Type of Action</u>
MGR	HECTOR F TABORDA	7058 NW 77th Ct Ste 100	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Miami, FL 33166	<input checked="" type="checkbox"/> Change
MGR	FABIOLA BELARANO	7058 NW 77th Ct Ste 100	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Miami, FL 33166	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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