L15000143779

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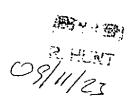
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DIVISION OF COMPORATIONS





ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ADDIUVA ENTERPRISES, LLC | | |
|---|--|---|
| (Name of the Limited Liabili (A Florida | ty Company as it now appears on our records.) a Limited Liability Company) | |
| The Articles of Organization for this Limited Liability C | Company were filed on 08/21/2015 | and assigned |
| Florida document number L15000143779 | <u>_</u> . | |
| The Articles of Organization for this Limited Liability Company were filed on 08/21/2015 and assigned Florida document number L15000143779 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 "LEC" WIST Enter 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 address on our records, enter the name of the new registered | | |
| A. If amending name, <u>enter the new name of the lim</u> | ited liability company here: | |
| The new name must be distinguishable and contain the words "Lim | ited Liability Company," the designation "LLC" or t | |
| Enter new principal offices address, if applicable: | | <u> </u> |
| (Principal office address MUST BE A STREET ADDR | RESS) | OF A |
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| Enter new mailing address, if applicable: | | 2: 22 |
| (Mailing address MAY BE A POST OFFICE BOX) | | 0 |
| | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | d office address on our records, <u>enter the</u> | name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida 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 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 | LUIS ALBERTO NARRO | Paseo de los Cedros No 123, Fraccionamiento y Club | , □ Add |
| | | de Golf, los Encinos, Amomoluco, Lerma, Estado de | = Remove |
| | | Mexico 520000 MX | _ Change |
| MGR | LUIS ALBERTO NARRO Pass de C Mex PIER FLAVIO DELLA SCHIAVA Los | Los Sauzales 2396, Lo Bernechea | _ □Add |
| | | Santiago de Chile 7700782 CL | _ = Remove |
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| if an effe <u>Note:</u> | ve date, if other than the date of filing: | 5.0207 (led as t |
| e record rd is file | 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 delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) | r the |
| Dated _ | 08/13/2023 | |
| | (1) | |
| | Signature of a member or authorized representative of a member | |

Filing Fee: \$25.00