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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:				
10.	Division of C	Corporations		•
		: (850)617-6383		<u> </u>
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From:		07177740 4075		-
	-	: RIVEROS CORP.		-
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		: (305)507-8464 : (786)516-2206		
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Estimated Charge

COVER LETTER

Division of Cor			
NEGOCIO SU BJEC T:	E2 LLC		
SUINECT,	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	GERMAN ROJAS		
		Name of Person	
	NEGOCIO E2 LLC		
		Firm/Company	
	175 SW 7TH STE 1906		
		Address	
	MIAMI FL 33130		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	детнитојаз01@уаћоо.соп		
For further information o	E-mail address: (oncerning this matter, please c	to be used for future annual report not	ification)
	orcerring this matter, prease c.		
GERMAN ROJAS		954 6558281 at ()	
Nате о	f Person	Ar ea Code Daytir	ne Telephone Number
Enclosed is a check for the	he 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)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Section Division of Corporations	
P.O. Box 632	.7	The Centre of	Tallahassee
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on ou Liability Company)	r records)
were filed on 10/19/201	and assigned?
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oility company here:	京
ility Company," the designati	on "LLC" or the abbreviation "L.L.C."
175 SW 7TH	
STE 1906	
MIAMI F1, 33130	
175 SW 7TH	
STE 1906	
MIAMI FL 33130	
address on our records	s, enter the name of the new registered
Enter Florida stre	et address
City	, Florida Zip Code
. ·	ility company here: ility Company," the designation of the strength of the st

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 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	Name	Address	Type of Action
			①Add
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O9/16/2021 If an effective date is listed, the date must be specific and cannot be prior to date. Note: If the date inserted in this block does not meet the applicable s document's effective date on the Department of State's records.	(optional) s of filing or more than 90 days after filing.) Pursuant to 605,0207 statutory filing requirements, this date will not be listed as
record specifies a delayed effective date, but not an effective time, at d is filed.	t 12:01 a.m. on the earlier of. (b) The 90th day after the
Dated SEPTEMBER 16 , 2021	
Signature of a member or authorized	representative of a member
adition of a member of annoused	rops councative of a manifest
AMDR	

Filing Fee: \$25.00