Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SANCHEZ & VADILLO, LLP

Account Number : I20150000038 Phone

Fax Number

: (305)485-9700 : (305)436-0191

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **FARIA CA LLC**

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

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JUL () , 2020

Electronic Filing Menu Corporate Filing Menu

Help

H200002054863

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Company as	it now appears on our records.) ity Company)	
The Articles of Organization for this Limited L			and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability C	ompany," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREI	ET ADDRESS)		
	_		
			2 <u>013</u> 3 JU
Inter new mailing address, if applicable:			<u></u>
Mailing address MAY BE A POST OFFICE	BOX)		
			-5
B. If amending the registered agent and registered agent and/or the new registered of		address on our records,	enter the name of the
Name of New Registered Agent:	FARIA URBINA, JOSE JOSE		
New Registered Office Address:	7950 NW 53 STRE	ET, SUITE 337	
		Enter Florida street address	
	MIAMI	, Flori	ida <u>33166</u>
		Ciţi	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

MGR = Manager

_□ ∧dd

_□ Remove

☐ 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:

AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			□ Remove	
			☐ Change	
			□ Remove	
			☐ Change	
			□ Remove	
			☐ Change	
			CI Remove	
			Change	
			Remove	
			Change	

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Effective date, if other than the factories of the date is listed, the date Note: If the date inserted in this document's effective date on the	must be specific and cannot be prosented the app	ficable statutory filing re-	optional) hen 90 days after filing.) Pursuant quirements, this date will not b	to 605.0207 (se listed as t
the record specifies a delay The 90th day after the r		not an effective time	a, at 12:01 a.m. on the (earlier of:
	2020			
Dated June 26		·		

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Typed or printed name of signee

Filing Fee: \$25.00