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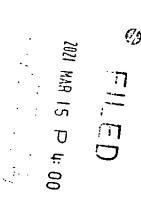
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| PICK-UP                          | WAIT MAIL              |   |
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| Certified CopiesC                | Dertificates of Status | _ |
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Office Use Only



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## **COVER LETTER**

|                   | istration Section sion of Corporation  | s   |   |
|-------------------|--|---|---|
|                   | Treelated He   | ·   |   |
| SUBJECT:          |  | Name of Limited Liability Company   |   |
| The enclosed      | Articles of Amenda   | ent and fee(s) are submitted for filing.  |   |
| Please return     | all correspondence of  | oncerning this matter to the following:   |   |
|                   | lisan  | dro rodriguez   |   |
|                   | <del></del>  | Name of Person  |   |
|                   |  | Firm/Company  |   |
|                   | 7381   | sw 8 st   |   |
|                   |  | Address   |   |
|                   | mian   | ท์ กิ 33144   |   |
|                   |  | City/State and Zip Code   |   |
|                   | usapa<br>  | wnmiami@gmail.com   |   |
| For further in    | formation concernin  | E-mail address: (to be used for future annual report notification) g this matter, please call:  |   |
|                   |  | 786 546 3707  |   |
| lisandro rodr     |  | at ()   | , |
|                   | Name of Person   | Area Code Daytime Telephone Number  | 9 |
| Enclosed is a     | check for the follow   | ing amount:   |   |
| □ \$25.00 F       |  | 2.00 Filing Fee &  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed) |   |
| Reg<br>Div<br>P.O | ling Address:<br>distration Section<br>ision of Corporat<br>. Box 6327<br>lahassee, FL 323 | The Centre of Tallahassee   |   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Treelated lic   |                                       |  |                              |
|---|---------------------------------------|--|------------------------------|
| ( <u>Name of the Limited</u><br>(A  | Liability Compan<br>Florida Limited L | iy as it now appears on our record iability Company) | <u>(s.)</u>                  |
| ne Articles of Organization for this Limited Liab   | oility Company v                      | were filed on 04/28/2016                             | and assigned                 |
| orida document number L16000084179  |                                       |  |                              |
| is amendment is submitted to amend the follow   | ving:                                 |  |                              |
| If amending name, enter the new name of t   | he limited liabii                     | lity company here:                                   |                              |
| a   |                                       |  |                              |
| e new name must be distinguishable and contain the wor  | ds "Limited Liabili                   | ty 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) |                                       | 7381 sw 8 st   |                              |
|   |                                       | miami fl 33144                                       |                              |
|   |                                       |  |                              |
| nter new mailing address, if applicable:  |                                       |  |                              |
| Aailing address MAY BE A POST OFFICE B  | <u>0X)</u>                            |  |                              |
|   |                                       |  |                              |
|   |                                       |  |                              |
| . If amending the registered agent and/or reggent and/or the new registered office address              |                                       | ddress on our records, <u>enter</u>                  | the name of the new regist   |
|   |                                       |  | <b>三</b>                     |
| Name of New Registered Agent:   | lisandro rodrigue                     | ez .   | 15                           |
| New Registered Office Address:  | 7381 sw 8 st                          |  | וו ס וו                      |
|   |                                       | Enter Florida street addres                          |                              |
|   | miami                                 | Flo  | orida 3314 <b>6</b>          |
|   |                                       | 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> | Name                 | Address                                | Type of Action                        |
|--------------|----------------------|--|---------------------------------------|
| mgr          | giovanni r rodriguez | 14358 sw 21 ter miami tl 33175         | ■Add                                  |
|              |                      |  | □Remove                               |
|              |                      |  | Change                                |
| mgr          | lisandro rodriguez   | 7381 sw 8 st miami fl 33144            | ≣Add                                  |
|              |                      |  | □ Remove                              |
|              |                      |  | □Change                               |
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| •            |                      |  | □Remove                               |
|              |                      |  | □ Channa                              |

Typed or printed name of signee