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Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : US CONTADOR INC Account Number : I20200000121 : (770)928-2700 : (888)772-8108 Fax Number

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WANDITA LLC

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Effective date, if other than the officer effective date is fished, the date inner Note: If the date inserted in this blo document's effective date on the De	late of filing: ne specific and cannot be prior to date of filing or more thank does not meet the applicable statutory filing requirement of State's records.	(optional) in 90 days after filing.) Pursuant to 605 direments, this date will not be liste	.0207 (3Kb) ed as the	
the record specifies a delayed effective cord is filed.	date, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after	the	
Dated	2021			
	7			
<u></u>	ignature of a member or authorized representative of a n	sember		
JORGE A PEREIRA				
	Typed or printed name of signee			

From: Mike Natarus

H210002904123

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WANDITA LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny a <u>s it now appears on our reco</u> r liability Company)	<u>(ds.)</u>	
The Articles of Organization for this Limited Liability Company forida document number £16000200911	were filed on 11/01/2016	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LL	.C" or the abbreviation "Lag."	
Enter new principal offices address, if applicable:		76 4	
(Principal office address MUST BE A STREET ADDRESS)			
		3	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u> o	er the name of the new register	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stives addivss		
	Florida		
-	CHY	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agt provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60:	ana i am jaminar wan and 5, F.S. Or, if this document is	
If Cha	nging Registered Agent, Signatur	e of New Registered Agent	

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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

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<u>Title</u>	Name	Address	Type of Action
MGR	PEREIRA, JORGE A	10275 COLLINS AVE	
		APT 1231	□Remove
		BAL HARBOUR, FL 33154	Change
AMBR	CAUNEDO, ISABEL L.	10275 COLLINS AVE	= Add
		APT 1231	□Remove
		BAL HARBOUR, FL 33154	OChange
AMBR	TRUST, ZEKI	10275 COLLINS AVE	□Add
	APT 1231	■Remove	
		BAL HARBOUR, FL 33154	□Change
			DAdd
			Change
			□Add
			TRemove
			□Add
			TRemove
			□Change