11/02/2021 TUE 14:18 DAX 6000 204925 Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PRONTO TAX & ACCOUNTING SERVICES, INC

Account Number : I20090000095 Phone : (305)267-1092 Fax Number : (305)267-2819

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

Email Address: (CORO MACORO) PROMOTOX, COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D & C WORLD TRADE LLC

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Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D & C WORLD TRADE LLC			2	
(Name of the Life	(A Florida Limited	iny as it now appear Liability Company)	VEMBER 4, 2016 and assigned	
The Articles of Organization for this Limited	Liability Company	were filed on NO	VEMBER 4, 2016 and assigned	
Florida document number L16000204925	•			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	ility company lie	Œ:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the de	algnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		210 172ND ST		
		APT 237		
		SUNNY ISLES BEACH, FL 33160		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX		210 172ND ST		
		APT 237		
		SUNNY ISLES BEACH, FL 33160		
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:			
Name of New Registered Agent:	NEPTALI C. LONGA HERNANDEZ			
New Registered Office Address:	210 172ND ST			
	Enter Florida street address			
	SUNNY ISLES		Florida 33160	
		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 Regulated Agent, Signature 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 heing added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	NEPTALI C LONGA HERNANDI	210 172ND ST	DAdd
		APT 237	
		SUNNY ISLES BEACH, FL 33160	Change
			□ Remove
			Change
			□Remove
			Change
			GAdd
			□Remove
			Change
			□Add
	•		□Remove
			Change
			□ Remove
			Change

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ective date, if other than the date of filling: effective date is listed, the date must be specific and cannot be prior to date of tiling e: If the date inserted in this block does not meet the applicable statutory ument's effective date on the Department of State's records.	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
cord specifies a delayed effective date, but not an effective time, at 12:01 as filed.	a.m. on the earlier of: (b) The 90th day after the
october 19 2021	
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