

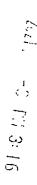
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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NAY 27 2021

COVER LETTER

TO: Registration 9 Division of Co				
SUBJECT:	(7,1/P1	n LLC		
	Name of Lan	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	<u>Car</u>	105 B. Name of Person	Rosani	O
		Pin LL		<u>-</u>
		Pay DR	unit 4	<u></u>
		Peach FL City/State and Zip Code		
	CBR (Q) Ros	<u>AFIO INVESTME</u> to be used for future annual	ntgroup	· Com
For further information of	concerning this matter, please co	all;		
Δ.	8056110 Persin		850 45 Daytime Telephe	OS one Number
Enclosed is a check for t	he following amount:			
	≤ \$30.00 Filing Fee & Certificate of Status ■ Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is each		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V	• <u> </u>	
Gildin LL		111:55
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company florida document number <u>L16000209.330</u> .	were filed on $5/24$	$\sqrt{21}$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab ROSARIO INVESTMENT OF C		the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1971 Bay Driv Miami Beach	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1971 Bay Dnu Miami Beach	e vnit 4 FL 33141
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	flari	da
	City	da

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.

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
e recor rd is ti	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the ed.
Dated	5/24 . 2021
	Signature of a member or authorized representative of a member [ar los B - Rosario]

Filing Fee: \$25.00