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(Requestor's Name)	
(Address)	20
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	i
(Document Number)	
Certified Copies Certificates of Status	
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Corporations		
s LLC		
Name of I	Limited Liability Company	
es of Amendment and fee(s) are	submitted for filing	
	-	
respondence concerning this mat	iter to the following:	
Santiago Pinera		
	Name of Person	
Name of Person		
13049 SW 122nd Av.		
	Address	···
Miami, FL33186		
	City/State and Zip Code	
		ification)
ion concerning this matter, pleas	se call:	
	_	
me of Person		ne Telephone Number
for the following amount:		
	Certified Copy	Certificate of Status &
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		-
	Santiago Pinera Luagus LLC 13049 SW 122nd Av. Miami, FL33186 leandro@dobleausa.com E-mail addression concerning this matter, pleas and of Person for the following amount: the Santiago Pinera Luagus LLC 13049 SW 122nd Av.	Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: Santiago Pinera Name of Person Luagus LLC Firm/Company 13049 SW 122nd Av. Address Miami, FL33186 City/State and Zip Code leandro@dobleausa.com E-mail address: (to be used for future annual report note of concerning this matter, please call: at (

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Luagus LLC		
(Name of the Limited Liability Compa (A Florida Limited	inv as it now appears on our records.) Liability Company)	
ne Articles of Organization for this Limited Liability Company	were filed on December 1st of 2016	and assigned
orida document number 1.16000218063		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	
nter new principal offices address, if applicable:		2020 NO
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		≘ .∏.
nter new mailing address, if applicable:		7 7
Mailing address MAY BE A POST OFFICE BOX)	·	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	e of the new regist
Name of New Registered Agent:		
New Registered Office Address:	P. P. L. L.	
	Enter Florida street address	
	, Florida	
	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 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>	<u>Name</u>	Address	Type of Action
Mgr	Daniel Pertica	13049 SW 122nd Av. Miami Fl 33186	🗆 Add
			≣Remove
			□Change
Mgr	Santiago Pinera	201 Crandon Blvd apt 728 Key Biskayne 33149	\exists Add
			20Remove 10V 11Change
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	December/1/2020		
	specific and cannot be prior to date of filing	(optional) g or more than 90 days after filing.) Pursuant	
ument's effective date on the Depart		filing requirements, this date will not	be listed
cord specifies a delayed effective dat s filed.	e, but not an effective time, at 12:01 a	a.m. on the earlier of: (b) The 90th da	ay after th
ed November 5	2020		
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Typed or printed name of signee