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(((H21000151586 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC Account Number : 120200000121 ; (770)928-27<del>0</del>0 Phone : (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, \*\*

Email Address:\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALMAS2608 LLC

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Certificate of Status	0
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Page Count	04
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Corporate Filing Menu

#Help\*\*\*

From: Mike Netarus

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALMAS2608 LLC	
(Name of the Limited Lighility (Al borda ki	Company as it now appears on our records.) imited Lability Company;
The Articles of Organization for this Limited Liability Con	mpany were filed on 01/01/2017 and assigned
Florida document number 1.16000229391	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	<u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	office address on our records, <u>enter the name of the new registere</u>
New Registered Office Address:	
	Enter Florida street address
	Cuy , Florida Ziji Cyde
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con-	nd agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this flocument is defice address, I hereby confirm that the limited liabilities.
	If Changing Registered Agent, Signature of New Registered Agent

From: Mike Natarus

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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

Ta: 18506176383

Title	<u>Name</u>	Address	Type of Action
MGR	PATURAU, ALEJANDRA G	9710 STIRLING RD #105	¡∃Add
		HOLLYWOOD, FL 33024	□Remove
			☐ Change
MGR	ROMAR INTERNATIONAL LLC	A DESCRIPTION OF UPS	□Add
		N MIAMI BEACH, FL 33181	Remove
			@Add
<del></del>			
		- Indiana - Indi	Change
			□Add
			☐Remove
			O∧dd
			☐ Change
			□Add
			□Remove
			□Change

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ffective	date, if other than the date of filing:
	we date is listed, the date must be specific and cannot be prior to date of thing or more than 90 days after timing,) runstain to decode the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed a
ocument	's effective date on the Department of State's records.
record sp	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	
, AP	PRII. 14TH 2021
ated	
	Signature of a member or authorized representative of a member
	Signature of a member of additional registrations