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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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CT CORP

(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

| D | ate: | 10/08/2024 | - w: DW |
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| | | Acc#I20160000072 | |
| Name: | De Aqui Sc | y USA LLC | |
| Document #: | ĺ | | |
| Order #: | 15906241 | | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | | Country of Destination: | |
| Apostille/Notarial Certification: | | Number of Certs: | |
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| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount | \$ 55.00 | |

Thank you!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

DE AQUI SOY USA LLC

2024 OCT -8 AM 10: 14

| (Name of the Limited Liability (| ompany as it now appears on ou | TALLAHASSEE, FLORIDA |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------|
| (At Figure 17) | inted Gaotiny Company) | TALLAHASSEE, FLORIDA |
| The Articles of Organization for this Limited Liability Com | pany were filed on $\frac{05/04/20}{}$ | and assigned |
| Florida document number 1.17000098853 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited</u> | I liability company here: | |
| The new name must be distinguishable and contain the words "Limited | Liability Company," the designat | ion "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRES | <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 o agent and/or the new registered office address here: | ffice address on our record | s, enter the name of the new registere |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida str | eet address |
| | | Florida |
| | - <i>•</i> | z.tp Code |
| New Registered Agent's Signature, if changing Registered A | | |
| I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered ages being filed to merely reflect a change in the registered company has been notified in writing of this change. | iplete performance of my d nt as provided for in Chapt | uties, and I am familiar with and er 605, F.S. Or, if this document is |
| | If Changing Registered Agent, <u>S</u> | gnature of New Registered Agent |

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

| Title | <u>Name</u> | <u>Address</u> | Type of Action |
|-------|----------------------|------------------------------|----------------|
| MGR | Eduardo Mendoza | 1065 SW 8th Street, PMB 5132 | □Add |
| | | Miami, FL 33130 | ■Remove |
| | | | □Change |
| MGR | Christian Cuadra | 1065 SW 8th Street, PMB 5132 | ■Add |
| | | Miami, FL 33130 | □Remove |
| | | | □Change |
| MGR | Hector I Covarrubias | 1065 SW 8th Street, PMB 5132 | □ Add |
| | | Miami, FL 33130 | =Remove |
| | | | □ Change |
| MGR | Hector Covarrubias | 1065 SW 8th Street, PMB 5132 | = Add |
| | | Miami, FL 33130 | □Remove |
| | | | Change |
| MGR | Roberto Macias | 1065 SW 8th Street. PMB 5132 | ■Add |
| | | Miami, Fl. 33130 | □Remove |
| | | | Change |
| MGR | Jamie Briceno | 1065 SW 8th Street, PMB 5132 | = Add |
| | | Miami, FL 33130 | □Remove |
| | | | □Change |

| ii amending any oth into | armation, enter change(s) here: (Attach additional sheets, if necessary.) | |
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| | FLORIDA FLORIDA | _ `_ |
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| If an effective date is listed, the da Note: If the date inserted in | the date of filing: | 05.0207 sted as |
| e record specifies a delayed e rd is filed. | ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af | ter the |
| Dated | . 2024 | |
| /s/ Christian C | Cuadra | |
| | Signature of a member or authorized representative of a member | |
| Christian Cuadra | | |

Filing Fee: \$25.00