

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L17000108665

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000325000 3)))



H220003250003ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

****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
CANU & CO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SEP 21 2022 4:52 PM

2022 SEP 20 PM 3:28
SECRETARY OF STATE
FALL ABBASSELHI 09/20/22

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 21 2022

< Back

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CANU & CO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/16/2017 and assigned
Florida document number L17000108665

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS**) _____

Enter new mailing address, if applicable: _____

(Mailing address **MAY BE A POST OFFICE BOX**) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: JULIO F CANUSSO

New Registered Office Address: 5151 COLLINS AVE APT 310

Enter Florida street address

MIAMI BEACH

Florida 33140

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 Registered Agent, Signature of New Registered Agent

2022 SEP 20 PM 3:28
FILED
TALLAHASSEE
FLORIDA

APPROVED
AND
FILED

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MATIAS J GIOFFRE	5151 COLLINS AVE APT 310	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MARIA F CANUSSO	5151 COLLINS AVE APT 310	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALICIA S ZAMPINI	5151 COLLINS AVE APT 310	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

