To: 18506176383 From: 12147128131 Date: 09/08/22 Time: 4:05 PM Page: 01/04

Florida Department of State

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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Rmail Address:_

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K Brumbler

·To: 18506176383 From: 12147128131 Date: 09/08/22 Time: 4:05 PM Page: 02/04

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H22000310151 3)))

EL PRIMERO LEC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny ay it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.17000109700}{1.17000109700}$.	were filed on 05/17/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil-	ity 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 a agent and/or the new registered office address here: Name of New Registered Agent New Registered Office Address:	Enter Florida street address Florida	APPROVED APP
New Registered Agent's Signature, if changing Registered Agent:		ੰ ਪ ੀ

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. Ov. 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.

H Changing Registered Agent, Signature of New Registered Agent

'To: 18506176383 From: 12147128131 Date: 09/08/22 Time: 4:05 PM Page: 03/04

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

(((H22000310151 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Urban Marketing Solutions Inc	13538 VILLAGE PARK DR STE 165	DAdd
		ORLANDO, FL 32837	■Remove
			[7]Change
		Dadd	
			ERemove
			I Change
			DAdd
		©Remove	
			□Change
			Dadd
		□Remove	
			DbAE
		DRemove	
			II Change
			DAdd
]Remove

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'To: 18506176383 From: 12147128131 Date: 09/08/22 Time: 4:05 PM Page: 04/04

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ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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record Lis file	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.
ated_	Signature of a member of authorized op esentative of a member
	Custato Parego
	Signature of a member of authorized epresentative of a member
	Ansbelto Bollego Typed or printed name of signee

 $((({\sf H22000310151\ 3})))$