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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: MARTIN ACCOUNTING & TAX SERVICE, INC

Account Number : I20060000012

Phone Fax Number : (305)826-5886 : (305)722-0535

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

Email	Address:	
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AUG 1 2 2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FORERO ENTERPRI				
(Name of the Limited Liability Come (A Florida Limited	pany as it now appears on our re I Liability Company)	cords.)		
The Articles of Organization for this Limited Liability Compar Florida document number <u>L17000113132</u>	y were filed on 05/22/2017	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	bility company here:	·		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "			
Enter new principal offices address, if applicable:		2011		
(Principal office address MUST BE A STREET ADDRESS)	1928 WEST 60th ST	<u> </u>		
	HIALEAH, FL 33012			
		9 [5]		
Enter new mailing address, if applicable:		P# 00 71		
(Mailing address MAY BE A POST OFFICE BOX)	1928 WEST 60th ST	<u> </u>		
Walling uparess MAT BE A FOST OFFICE BOXY	HIALEAH, FL 33012	3		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ords, enter the name of the ne		
Name of New Registered Agent: PEREZ DIAZ	PEREZ DIAZ, EDUARDO E			
New Registered Office Address: 1928 WEST	60th ST.	·		
	Enter Florida street address			
HIALEAH		Florida 33012AMBR		
	City	Zip Code		

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 the duties, and I am familiar with and accept the obligations of my position as registered agent as provided for if thapter 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

Page 1 of 3

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> FORERO, JOSE R	Address 15974 NW 918T CT	Type of Action
AMBR		MIAMI LAKES, FL 33018	
			■ Remove
	FORERO, CLAUDIA ESTELLA	15974 NW 91ST CT	Change
AMBR		MIAMI LAKES, FL 33018	Add
			Remove
AMBR	PEREZ DIAZ, EDUARDO	765 CRANDON BLVD STE 409 KEY BISCAYNE, FL 33149	—————————————————————————————————————
			9 Remove
			Change
AMBR	SALAH, FLAVIA	765 CRANDON BLVD STE 409 KEY BISCAYNE, FL 33149	—————————————————————————————————————
			Remove
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