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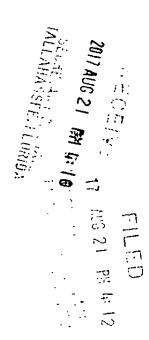
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| | Registration Se Division of Cor | | | | |
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| cun irz | Can be Don | | | | |
| SUBJEC | 1: | Name of Lim | ited Liability Company | | |
| | | | | | |
| The enclo | osed Articles of . | Amendment and fee(s) are sub | mitted for filing. | | |
| Please ret | turn all correspo | ndence concerning this matter | to the following: | | |
| | | Ralph Serrano CPA | | | |
| | | | Name of Person | | |
| | | | Firm/Company | | |
| | | 9425 SW 72 St #233 Address Miami, Fl. 33173 City/State and Zip Code | | | |
| | | | Address | | |
| | | Miami, Fl. 33173 | | | |
| | | | City/State and Zip Code | | |
| | | E-mail address: (| to be used for future annual report | notification) | |
| For furthe | er information co | oncerning this matter, please ca | all: | | |
| Ralph Se | ггано СРА | | 305 412-7273 | 3 | |
| | Name o | f Person | Area Code Day | ytime Telephone Number | |
| Enclosed | is a check for th | ne following amount: | | | |
| \$25.0 | 00 Filing Fee | □ \$30,00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Certificate of Certified Cop (additional copy | Status & ૂ ý |
| | Registr Divisio P.O. Bo | ING ADDRESS: ation Section n of Corporations ox 6327 assec, FL 32314 | STREET/COU Registration So Division of Co Clifton Buildin 2661 Executive | rporations ag | P: 4: 12 |

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Can Be Done 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 July 5, 2017 and assigned Florida document number L17000144224 |
| 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 ne registered agent and/or the new registered office address here: |
| Name of New Registered Agent: |
| New Registered Office Address: |
| New Registered Office Address: New Registered Office Address Enter Florida street address |
| |
| New Registered Agent's Signature, if changing Registered Agent: |
| 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 |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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> | Address | Type of Action |
|--------------|-------------|-------------------|----------------|
| AMBR | Pedro Lopez | 2700 Oakmont Ct | |
| | | Weston, Fl. 33332 | ■ Remove |
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| | described to the same of the s | |
| effect | date, if other than the date of filing: | |
| | he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I is effective date on the Department of State's records. | isted |
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| | | <u>_</u> |
| | d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear Oth day after the record is filed. | |
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| .,I | AVav51 1/2 2017 12 | |
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| | (W Kartanat | |
| | Signature of a member or authorized representative of a member | |
| | • | |

Page 3 of 3

Filing Fee: \$25.00