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SECRETARY OF STATION

COVER LETTER

TO:	Registration Se Division of Cor				,	
	CURVAL	8. LLC				
SUBJI	ECT:		Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment	and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence cond	erning this matter	to the following:		
		LYDIA	C. QUESADA, E	SQ.		
		-		Name of Person		
		ADAMS	& ASSOCIATE	S, P.A.		
				Firm/Company		
		6500 CQ	WPEN RD, SUI	ΓE 101		
				Address	<u>-</u>	
		МІАМІ	LAKES, FL 330	14		
				City/State and Zip Code	•	
		GPERRY		@GMAIL.COM to be used for future annual repo	ort portification)	
For fur	rther information o	concerning thi			······································	
	A C. QUESADA		•	305 824-98	200	
LTDI		of Person		at ()	Daytime Telephone N	
	Name	retson		Area Code I.	zaytime releptione is	milet
Enclos	sed is a check for t	he following:	amount:			
≡ \$2	25.00 Filing Fee		Filing Fee & ficate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Cer i) Cer	00 Filing Fee, tificate of Status & tified Copy itional copy is enclosed)
	Mailing Addre Registration Division of C P.O. Box 633 Tallahassee,	Section Corporation 27	s	The Centre 2415 N. M		ite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CURVAL 8, LLC			
(Name of the Limi	ted Liability Compa	iny as it now appears on our Liability Company)	records.)
	(A Florida Ellinica)	maoniny Company)	
The Articles of Organization for this Limited L	iability Company	were filed on 07/28/2017	and assigned
Florida document number L17000 61532	·		
This amendment is submitted to amend the foll	lowing:		
A. If amending name, <u>enter the new name c</u>	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	9898 Broadview Terrace	
(Principal office address MUST BE A STREE		Bay Harbor Islands, FL	33154
17melpai office marello 17001 12 1701112	31 110 011 010 7		
Enter new mailing address, if applicable:		9898 Broadview Terrace	
(Mailing address MAY BE A PO\$T OFFICE	· POV	Bay Harbor Islands, FL	33154
Mailing dauress MAT BE A FOST OFFICE	<u> </u>		
B. If amending the registered agent and/or	registered office	address on our records.	enter the name of the new register
agent and/or the new registered office addre		•	~
Name of New Registered Agent:			<u></u>
New Registered Office Address:	9898 Broadvie	w Terrace	
New Registered Office Address.		Enter Florida street	address
	Bay Harbor Isl	ands	Florida 33154
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the proj	per and complete	performance of my duti	es, and I am familiar with and
accept the obligations of my position as reg being filed to merely reflect a change in the			
company has been notified in writing of this		accir coo, i nereny congr	m mai me iimiea iidoiii,
	·		
	ICCh.	naina Praistaged Agent Sian	sture of New Pagistared 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Gustavo N. Perry Rojo Contitsis	9898 Broadview Terrace	□Add
		Bay Harbor Islands, FL 33154	□Remove
		-	■ Change
AMBR	Cristina M. Perry Rojo Contitsis	9898 Broadview Terrace	🗆 Add
		Bay Harbor Islands, FL 33154	□Remove
		_	■ Change
AMBR	Cristina Contitsis	9898 Broadview Terrace	□ Add
		Bay Harbor Islands, FL 33154	□Remove
			☐ Change
			□ Add
			□ Remove
		· 	
			□Add
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(If an etF Note:	If the date inserted in th	the date of filing:
ne record ord is fil		fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	October 4, 2022	2022
Dateu		
		Signature of a member or authorized representative of a member