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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

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COVER LETTER

TO:

| TO: | | | | | |
|--|--------------------|--------------------------------|--|--|--|
| CUD IE | | | | | |
| SUBJEC | ~I: <u> </u> | | ited Liability Company | | |
| The encl | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | cturn all correspo | ondence concerning this matter | to the following: | | |
| | | DANIELA BALDOVINO | | | |
| | | . | Name of Person | | |
| | | UNTITLED SLC | | | |
| | | | Firm/Company | | |
| | | 1801 N.E. 123rd Street, Su | ite 307. | | |
| Division of Corporations MARLO LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: DANIELA BALDOVINO Name of Person UNTITLED SLC Firm/Company 1801 N.E. 123rd Street. Suite 307. Address North Miami. Florida, 33181 City/State and Zip Code DANIELA.BALDOVINO@UNTITLED-SLC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DANIELA BALDOVINO Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Mailing Address: Registration Section Street Address: Registration Section | | | | | |
| | | North Miami, Florida, 331 | 81 | | |
| City/State and Zip Code | | | City/State and Zip Code | | |
| | | - | | | |
| For furth | ner information o | | · | | |
| | | - | 786 899.4374 | | |
| | Name o | of Person | | | |
| Enclosed | d is a check for t | he following amount: | | | |
| □ \$25. | .00 Filing Fee | | Certified Copy Certificate of Status & | | |
| | • | | | | |
| | _ | | Division of Corporations | | |
| | P.O. Box 632 | | The Centre of Tallahassee | | |
| | Tallahassee, | FL 32314 | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

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

| (<u>Name of the Limited Liability</u> (A Florida I | Company as it now appearing the Liability Company | ears on our records.) ') | | |
|--|---|-----------------------------------|----------------|---------------|
| he Articles of Organization for this Limited Liability Co | mpany were filed on 2 | 25 OCTOBER 2017 | and assig | gned |
| lorida document number L17000221056 | | | | |
| his amendment is submitted to amend the following: | | | | |
| . If amending name, enter the new name of the limit | ed liability company | <u>here</u> : | | |
| ne new name must be distinguishable and contain the words "Limit | ad Liabiliu Commany "the | a degiseration "FT C" on the able | i-si vI I | <u></u> |
| te new name must be distinguishable and contain the words. Elimin | id Ciability Company, The | e designation LLC or the app | reviation "L.L | .c. |
| nter new principal offices address, if applicable: | | | 21 | <u>-334</u> |
| rincipal office address MUST BE A STREET ADDRE | North Miami. | Florida, 33181 | APR | 妥る |
| | | | 5 | - 442 - 01 |
| | - | | РН | |
| nter new mailing address, if applicable: | 1801 N.E. 121 | 3rd Street, Suite 307 | 12: | |
| failing address MAY BE A POST OFFICE BOX) | North Miami, | Florida, 33181 | 07 | - 1 |
| If amending the registered agent and/or registered ent and/or the new registered office address here: Name of New Registered Agent: UNTITIES | office address on our | records, enter the name | of the new | regist |
| | | | | |
| New Registered Office Address: 1801 N. | E. 123rd Street, Suite 30 | | | |
| | | lorida street address | | |
| North M | iami | Florida ³³¹⁸ | 31 | |
| | City | | Zip Code | |

MARLO LLC

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

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 |
|--------------|------------------------|-----------------------------|----------------|
| MGR | UNTITLED MANAGERS LTD | CASABLANCA HOUSE, LUCK HILL | Ж A₫d |
| | | TORTOLA, BVI, TO VG1110 VG | A / Idd |
| | | | □Remove |
| | | | □Change |
| MGR | MARIA CECILIA MARTINEZ | 150 SE 2ND AVE, SUITE 505 | □Add |
| | | MIAMI, FL, 33131, US | |
| | | | XRemove |
| | | | □Change |
| MGR | EDUARDO ALBERTO | 150 SE 2ND AVE, SUITE 505 | □ Add |
| | LOMBARDI | MIAMI, FL, 33131, US | |
| | | | (XRemove |
| | | | □Change |
| | | | □ Add |
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| ecti | ve date, if other than the date of filing: 19 March 2020 (optional) |
| II CII | ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as |
| cum | ent's effective date on the Department of State's records. |
| | |
| | d 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 |
| is fil | ed. |
| | April 9th 2001 |
| ted | April 8th |
| | |
| | |
| | Signature of a member or authorized representative of a member |
| | Signature of a member or authorized representative of a member |