L17000249219

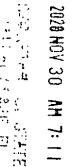
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COVER LETTER

TO: Registration S Division of Co			
	STATE, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
	ondence concerning this matter	-	
, , , , , , , , , , , , , , , , , , , ,			
	Ernesto M De La Hoz		
		Name of Person	
	De La Hoz & Associates,	CPA, PA	
		Firm/Company	
	782 NW 42 Ave., Suite 3	41	
		Address	
	Miami, FL 33126		
		City/State and Zip Code	
	edelahoz@epadelahoz.con E-mail address:	(to be used for future annual report notification)	
For further information	concerning this matter, please of		
Ernesto M De La Hoz		305 860-8340	
Name	of Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
S25,00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
Mailing Addro Registration Division of (P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ED

GIGAESTATE, LLC

TE. LLC 2020 NOV 30 AH 7: 11

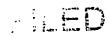
(Same of the Limited Liability Company as it now appears on our records.)

If Changing Registered Agent, Signature of New Registered Agent

(A Florida Limited I	Liability Company) Section 18 18 18 18 18 18 18 18 18 18 18 18 18
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000249219</u>	were filed on 12/05/2017 File and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	950 Brickell Bay Dr, Unit 4904
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33131
Enter new mailing address, if applicable:	950 Brickell Bay Dr. Unit 4904
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Fl 33131
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:	address on our records, enter the name of the new registered
	-
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as playing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and orovided for in Chapter 605, F.S. Or, if this document is

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 2028 NOV 30 AM 7: 11	Type of Action
MGR ———	Santiago Lora Botero	950 Brickell Bay Dr. Unit 4904 F1	= Add
		Miami, FL 33131	□Remove
			☐Change
			□ Add
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	2029 NOV 30 AM
	SERVICE CO.
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to d	(optional)
<u>te:</u> If the date inserted in this block does not meet the applicable	ate of filing or more than 90 days after filing.) Pursuant to 605 0: estatutory filing requirements, this date will not be listed
rument's effective date on the Department of State's records.	
cord specifies a delayed effective date, but not an effective time, s filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after t
acd November 18th 2020	
Jose Manuel S.	
signature of a member or authorize	ed representative of a member
→	

Filing Fee: \$25.00