Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

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	Division of Corporations	II (%)	9
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	Account Name : LAZARUS CORPORATE FILING SERVICE, INIL		σ
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anı	the email address for this business entity to be used for mual report mailings. Enter only one email address please. Mil Address:	future **	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BALITA US LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BALITA US LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	<u> </u>	
ne Articles of Organization for this Limited Liability Company	were filed on 02/14/2018	and assigned	
orida document number L18000040987			
nis amendment is submitted to amend the following:			
. If amending came, enter the new name of the limited liab	illty company here:		
WA_			
te new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."	
nter new principal offices address, if applicable:	11360 NW 74th TERRACE		
rincipal office address MUST BE A STREET ADDRESS)			
:	MIAMI, FL 33178		
nter new mailing address, if applicable:	11360 NW 74th TERRACE		
failing address MAY BE A POST OFFICE BOX)			
	MIAMI, FL 33178		
If amending the registered agent and/or registered of gistered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address	the name of the	
	Florida		
. ———	City , Florida	Zip Code	

## New Registered Agent's Signature, if changing Registered Agent:

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

\_□ Change

MGR = Manager

07/16/2019 15:44 3052201440

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member Title Name **Address** Type of Action ANTONIO CELIS 11360 NW 74th TERRACE MGR DbA 🙀 \_🗆 Remove MIAMI, FL33178 □ Change **ELIAS CELIS** 11360 NW 74th TERRACE MĠR \_D Add □ Remove MIAMI, FL33178 \_☑ Change \_ 🗆 Add ☐ Remove \_□ Change ☐ Remove \_O Change \_□ Add ☐ Remove ☐ Change 

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