L18000044974

(Daniel J. News)
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FO: Registration Section Division of Corporations		L	180000 4497
SUBJECT: MOST tro	Name of Limited Liability Com	Frent. C	-LC
The enclosed Articles of Amendment and	fee(s) are submitted for filing.		
Please return all correspondence concerni	ng this matter to the following:		
			ndo Herrera
Most	trusted In	vestments	LLC.
289	5 S. Lalle C. Address	AV # 14	<u>/</u>
Fro	stproof FL City/State and Z	3384	3.
KATH	mult address; (to be used by futur	mail - wo	<u> </u>
or further information concerning this n			
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inclosed is a cheek for the following amo	this comp	is Holden	GESTY OUR
☐ \$25.00 Filing Fee ☐ \$30.00 Fil Certifica	ing Fee & ☐ \$55.00 Fil te of Status Certified	ing Fee & 🗀	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

(<u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our records.) Ed Liability (Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L 10000 4497</u> 4	ny were filed on $\frac{02/20/8}{20}$ and assigned.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	
\mathcal{W}/\mathcal{A} . The new name must be distinguishable and contain the words "Limited Lie	
The new name must be distinguishable and contain the words "Limited Lis	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	285 S. Lake av # 14 Frost proof FC 33843
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	285 S. Lake GV # 14 Exostproof FL 33843
B. If amending the registered agent and/or registered office	ce address on our records, enter the name of the new registered
agent and/or the new registered office address here:	
Name of New Registered Agent: New Registered Office Address: 285	5 3. Lake ON # 14 =
fros	Finer Florida street address \$\frac{1}{10000} \text{Florida street address} \tag{33843} Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>

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 Type of Action Title Name Address MGR Fernando Herreura 285 S. Lake av # 14 Frost proof FL 33843 XChange Registered Remando 285 S. Lake av # 14 Frostproof EC 33843 Kehange AP KATHIOZILA CHIQUITO 285 S. La. Ke av # 14 Frostproof EL 33843 XChange

□ Change

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ctive date, if other than the date of filing:	(optional) than 90 days after filing.) Pursuant to 605.02
E If the date inserted in this block does not meet the applicable statutory filing runners's effective date on the Department of State's records.	equirements, this date will not be listed a
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after th
filed.	
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Signature of a member or authorized representative of	a member