L18000163904

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

	1. COSCOFIA, LLC (CORPORATE NAME)		<u>L18000163904</u> (DOCUMENT #)			
2. (CORPORATE NAME)			(DOCUMENT #)			
3. (CORPORATE	3. (CORPORATE NAME) (DC					
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	X Pick up time:	Certified Cop	Other Filings			
Walk-In New Filings Profit	X Pick up time:		Other Filings			
New Filings	X Pick up time:	Amendments		rt		
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New Filings Profit Non-Profit	X Pick up time:	Amendments Amendments Resignation	Other Filings Annual Repo	rt		

Examiners Initials

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

CASCOFLA, LLC

2022 OCT 10 AM 9: 03

(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited	any as it now appears on our r Liability Company)	TALLAHASSEF, ET	
			and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility 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	cument number L18000163904 dment is submitted to amend the following: ending name, enter the new name of the limited liability company here: me must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." principal offices address, if applicable: ### Office address MUST BE A STREET ADDRESS ### MEDLEY, FL 33178 ### Winding address, if applicable: ### MEDLEY, FL 33178 ### MEDLEY, FL 33178			
(Principal office address MUST BE A STREET ADDRESS)		MEDLEY, FL 33178		
Enter new mailing address if annicable		8740 NW 99TH ST		
(Mailing address MAY BE A POST OF FICE	BOX)	MEDLEY, FL 33178		
Manny dauress MATT BEATT ONL OF THEE BONY				
B. If amending the registered agent and/or agent and/or the new registered office addressed of New Registered Agent:	ess here:		nter the name of the new registere	
New Registered Office Address:	8740 NW 99TH ST			
		Enter Florida street d	ddress	
	MEDLEY		_, Florida 33178	
New Registered Agent's Signature, if changing	D d A A	City	Zip Code	
I hereby accept the appointment as registered provisions of all statutes relative to the propactions of the obligations of my position as registery being filed to merely reflect a change in the company has been notified in writing of this	ed agent and agr per and complete istered agent as _l registered office	ee to act in this capacity, performance of my dutie provided for in Chapter (es, and I am familiar with and 605, F.S. Or, if this document is	
	If Chai	nging Registered Agent, Signa	ture 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>	Name	<u>Address</u>	Type of Action
MGR	VICTOR MORENO BARRERA	900 BISCAYNE BLVD	□Add
		#5305	= Remove
		MIAMI, FL 33132	□Change
MGR	OSCAR SANCHEZ	8740 NW 99TH ST	
		MEDLEY, FL 33178	□Remove
			\equiv Change
MGR	SEBASTIAN MOSSE	8740 NW 99TH ST	□Add
		MEDLEY, FL 33178	
			≡ Change
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Effective date, if other than t	ne date of filing:			(option	al)		
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document's effective date on the			, ,				
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