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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lin	SALMOS 2 pited Liability Com (A Florida Limite	3 V, LLC pany as it now supear d Liability Company)	on our records.	·		
The Articles of Organization for this Limited					and	assigned
Florida document number 18000164176						·
This amendment is submitted to amend the fo	llowing:	ļ				
A. If amending name, enter the new name	of the limited He	Litte				
N/A	or the minited its	omy company her	<u>'e</u> :	77.	<u> </u>	
The new name must be distinguishable and contain the	Henrica 41 1—in 4.1.1.1	97.		<u> </u>		
		anty Company," the des	signation "LLC" o	r the abbr	evi ati gn	"L.L.Ç."
Enter new principal offices address, if appli	cable:	N/A		,	~ <	
Principal office address MUST BE A STRE	ET ADDRESS)			:		(1)
				 -	22-	
				1	وي	
Enter new mailing address, if applicable:		N/A		>	် မ	
Mailing address MAY BE A POST OFFICE	BOX)	-				-
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If amending the registered agent and egistered agent and/or the new registered o	or registered o	ffice address on a				
egistered agent and/or the new registered o	ffice address her	<u>e</u> :	ur recoras, <u>e</u>	nter th	е пато	e of the n
Name of New Registered Agent:	N/A					
New Registered Office Address:						
- 		Enter Florida	street address			
			, Florid	۱۵		
an Barta. A		City	,		Zip Çade	

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

3052201440

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

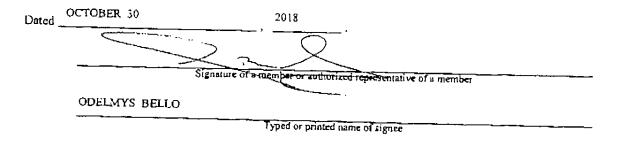
MGR = Manager AMBR = Authorized Member

<u>Title</u> MGR	Name ODELMYS BELLO	Address 277 E. 4th Street	Type of Action
		HIALEAH, FLORIDA 33010	bbA □
			■ Remove
MGRM	ODELMYS BELLO	277 E. 4th Street	☐ Change
		HIALEAH, FLORIDA 33010	■ Add
			☐ Remove
MGR	VIDAL SURIEL	277 E. 4th Street	Change
		HIALEAH, FLORIDA 33010	
			Remove
MGRM	CORNERSTONE CAPITAL INVESTMENTS, INC.	6505 BLUE LAGOON DR. #130 MTAMI, FLORIDA 33126	Change
			■ Add [7]
			Change
			O Add
			□ Remove
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	•		Remove
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date, if other t	han the date of filing:	10/30/20	18	(optional)	
IVE Date is listed th	e date must be considered and			(Optional) Odays after filing \ P.o.	POLA A4 INGELIZA
OR DATE INSERTED	in this block does not mee on the Department of State	t the applicable stan	tory filing require	ments, this date will	not be liete

If the record 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 record is filed.



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