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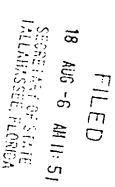
(Requestor's Name)
(Address)
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COVER LETTER

TO:	Registration Se Division of Cor				
	ROMIJECA	A LLC			
SUBJI	r.C.1:	Name of Lim	ited Liability Company		
The en	iclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		KARINA ROCHA			
			Name of Person		
		ROMAR INTERNATION	IAL LLC		
			Firm/Company		
14334 BISCAYNE BLVD					
			Address		
		NORTH MIAMI BEACH,	FL 33181		
City/State and Zip Code					
		KARINA@TAXLEAF.CO			
			to be used for future annual report notif	ication)	
For fu	rther information co	oncerning this matter, please c	all:		
KARII	NA ROCHA		305 209-9933		
	Name o	f Person	at () Area Code Daytime	e Telephone Number	
Enclos	sed is a check for th	ne following amount:			
≘ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROMIJECA LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were tiled on JULY, 10TH, 2018	and assigned
Florida document number L18000166617	- -	三篇 6
This amendment is submitted to amend the following:	Y	題言工
A. If amending name, enter the new name of the limited liab	oility company here:	-6 M
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4111 S OCEAN DRIVE #2701	复型 5
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD, FL 33319	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4111 S OCEAN DRIVE #2701 HOLLYWOOD, FL 33319	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	F	
	Enter Florida street address	
	, Florid:	
	City	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

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

. 18 .

Title	<u>Name</u>	Address	Type of Action
MGR	DIAS DELGADO, RUBEN D	20803 BISCAYNE BLVD, STE	
		AVENTURA, FL 33180	■ Remove
			☐ Change
MGR	DIAS DELGADO, RUBEN D	4111 S OCEAN DRIVE #2701	B Add
		HOLLYWOOD, FL 33319	□ Remove
			☐ Change
			Remove SE OF Change Change
			PLORADA SEMOVE
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an effective date is listed, the date of the date of the date inserted in the date inserted in the date inserted in the date of the date of the date inserted in the date of t		r to date of filing or more than 9 cable statutory filing require	(optional) 0 days after filing.) Pursuant to 605,020 ments, this date will not be listed as
e record specifies a dela The 90th day after the		ot an effective time, at	12:01 a.m. on the earlier o
ated	2018		
		·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00