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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KRAVITZ TALAMO & LEYTON, PLLC

Account Number : 120150000096 : (305)558-5300 Phone Fax Number : (305)557-1934

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. ** Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAW OFFICE OF DIEGO MACHADO PLLC

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SEP 0 9 2021

S. PRATHER

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Corporate Filing Menu

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ARTICLES OF	FAMENDMENT	
•	TO	→ 1
ARTICLES OF	ORGANIZATION	C 1021
(OF	2 29
		2021 SEP -8
Law Office of Diego Machado PLLC		(i)
(Name of the Limited Liability Com (A Florida Limite)	pany as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Compar	ny were filed on 7/20/2018	and assigned
Florida document number L18000175005		j. U
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Diego Machado, PLLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter pay named affices address if applicables		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
B. If amending the registered agent and/or registered offic	e address on our records, <u>en</u>	ter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ade	dress
		Florida
- Martin	Ciţi	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.

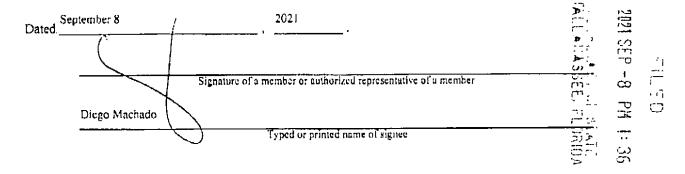
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	Name	Address	Type of Action
			⊡Add
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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.



Filing Fee: \$25.00