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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HISPANUSA INC Account Number : I20070000099 Phone : (954)478-2706 Fax Number : (954)934-0334

**Enter the email address for this business entity to be used for future ${}^{11}_{}$ annual report mailings. Enter only one email address please. **

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WW CARVAJAL CATERING LLC

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T. LEMIEUX

JAN 22 2024

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	WW CAR	VAJAL CATERING LLC		
SUBJE	.C1:		nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please i	etum all correspo	ondence concerning this matter	to the following:	
		WILLIAM CARVAJAL		
			Name of Person	_
			Firm/Company	
		8050 N UNIVERSITY DE	R STE 206	
			Address	
		TAMARAC, FL 33321		
			City/State and Zip Code	
		wilcarq64@hotmail.com	to be used for future annual report notification)	_
For flut	her information co	oncerning this matter, please c	·	
WILLIA	AM CARVAJAL		954 825-1325 at ()	
-	Name of	Person	Area Code Daytime Telephone Nur	nber
Enclose	d is a check for th	e following amount:		
€ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	O Filing Fee, ficate of Status & fied Copy conal copy is enclosed)
	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	e 310

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WW CARVAJAL CATERING LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Flor	ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L18000177402	Company were filed on 07/24/2018 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
WW CARVAJAL INVESTMENTS LLC	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register agent and/or the new registered office address here:	ed office address on our records, enter the name of the new registered
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	= -
	Enter Florida street address , Florida
New Registered Agent's Signature, if changing Register	City ? The Code O
Thereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered to	and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red office address, I hereby confirm that the limited liability

_ 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 = M $AMBR = A$	Tanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
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Note:	tive date, if other than the da ffective date is listed, the date must be If the date inserted in this block ment's effective date on the Depa	s does not meet the applicat	date of filing or more than 90 da le statutory filing requiremer	(optional) ys after filing.) Pursuant to 605.0207 (2 ts, this date will not be listed as th
the reco	ord specifies a delayed effective d iled.	ate, but not an effective tim	e, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Dated	JANUARY 19TH	2024		
274100	. (THE STATE OF THE S	- 0	

Till Ti marco

Typed or printed name of signer