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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FANJUL CPA, INC. Account Number : I20130000039 Phone : (305)603-8791 : (877)503-6086 Fax Number

••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 CASTILLO PRAJ INVESTMENTS LLC

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To:

Fax: (850) 617-6383

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08/21/2019 4:59 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASTILLO PRAJ INVESTMENTS LLC				
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000187051</u>	were filed on $\frac{08/03/2018}{}$ and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	Tity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	13727 SW 152ND STREET PMB 15688			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33177			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13727 SW 152ND STREET PMB 15688 MIAMI, FL 33177			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records, <u>enter the name of the ne</u> <u>re</u> :			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florada street address			
	. Florida Zip Code			
	Cny 24 Oout			

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

From: Robert Fanjul

Fax: 18775036086

To:

Fax: (850) 617-6383

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	CARLOS A GIRALDO	5040 NW 7TH ST, STE 705	_
		MIAMI, FL 33126	
			■ Remove
			☐ Change
MGR	ALEJANDRO CASTILLO	13727 SW 152ND STREET PMB 15688	□ Add
		МІАМІ, FL 33177	
			□ Remove
			🗀 Remove
			☐ Change
			Add
			Remove
			Change
			Remove
			☐ Change
			□ Remove
			Change

17. 11 41	nending any ot	her informat	ion, enter ch	nange(s) here	: (Attach additional)	sheets, if nece	essary.)	
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(b) T	he 90th day a	ifter the rec	ord is filed.		•			
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