Tc: 18506176383

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations		
	Fax Number : (850)617-6	383	
From:			
	Account Name : LEGALINC C		
	Account Number : 1201800000 Phone : (844)386-0		
	Fax Number : (214)317-4	1754	
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Corporate Filing Menu

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Electronic Filing Menu

To: 18506176383 From: 12147128131 Date: 11/19/19 Time: 10:08 AM Page: 02/04

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H19000338923 3)))

CARAVANA FLORIDA, LLC	ed Liability Compan	ty as it now appears on o	or records.)	<u> زم</u> يرم	
	(A Florida Limited L.	iv as it now appears on o		<b>6</b> 5	
The Articles of Organization for this Limited Li	ability Company	were filed on 10/19/20	18	- Bans	i assigned.
Florida document number 1.18000246589	·		• •	19	0.00
This amendment is submitted to amend the follo	owing:				3 000
A. If amending name, enter the new name of	the limited liabi	lity company here:			0,04
•					<i>o</i>
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designet	ion "LLC" or t	he abbreviation	ı"L.L.C."
Enter new principal offices address, if applic	able:	5342 CLARK ROAD	#1095	· ·	·
(Principal office address MUST BE A STREE		SARASOTA, FL 342	13		;
Enter new mailing address, if applicable:		5342 CLARK ROAD,	#1095	·	
(Mailing address MAY BE A POST OFFICE)	BOX)	SARASOTA, FL 3423	13		
B. If amending the registered agent and/	or registered off	ice address on our	records, <u>en</u>	ter the par	ne of the r
registered agent and/or the new registered of	nce address nere				
Name of New Registered Agent:	LEGALING CO	RPORATE SERVICES	INC.		
New Registered Office Address:	5237 SUMMER	LIN COMMONS BLVI	SUITE 400		
Jaco Achtered Contest March.		Enter Florida stre	et address		•
	FORT MYERS		, Florida	33907	
		CIN	<del>-</del>	Zip Co	de
		1317,			

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 Asset

Page 1 of 3

To: 18506176383 From: 12147128131 Date: 11/19/19 Time: 10:08 AM Page: 03/04

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

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MGR = Manager

Anthonized Member

Title	Name	Address		Type of Actio
MGR	CHRISTOPHER SUAREZ		MS AVENUE	□ Add
· · · · · · · · · · · · · · · · · · ·		CAPECA	NAVERAL, FL 32920	₩ Kemove
				☐ Change
MGR	OJJEHNNAL OPOŠAL	5342 CL	ARK ROAD, #1095	
		SARASC	OTA, FL 34233	☐ Remove
				<b>⊊</b> Change
AMBR	CARAVANA US, INC.	24A TRO #1151	DLLEY SQUARE.	bhA læ
		WILMIN	NGTON DE, 19806-3334	☐ Remove
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cor	d specifies a delayed effective d Oth day after the record is filed.	iate, but not an e	ffective time, at 1.	2:01 a.m. on the eather:
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	Signifure of &	member or authorized re	presentative of a member	
		/	•	
	LACODO LA MINUELLO			
	JACOPO JANNIELLO	Typed or printed name	of signed	