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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTADORUSA INC. Account Number : I20200000118

: (305)260-6968 Phone Fax Number : (786)513-7810

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GEA BUSINESS LLC**

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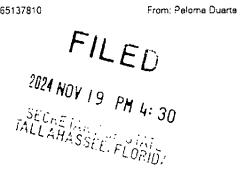
Help

K. SALY

NOV 2 0 2024

From: Paloma Duarte

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GEA HUSINESS LLC			
(Name of the Limited Liability Comma (A Florida Limited)	ny as il now appears on our records) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L18000287102	were filed on 2/14/2018 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	llity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "LLC."		
Enter new principal offices address, if applicable:	21450 SAWMILL CT		
(Principal office address MUST BE A STREET ADDRESS)	BOCA RATON, FL 33498		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or registered office address her			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addrass		
	City Zip Code:		
New Registered Accent's Signature, if changing Registered Accent.	•		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

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 remove	d from our records:		
MGR = AMBR = <u>Title</u>	Manager Authorized Member <u>Name</u>	Address	Type of Action
AMBR	DE LA ROSA ANDRE, MARIANA	21450 SAWMILL CT	_ ₩ Add
		BOCA RATON, FL 33498	☐ Remove
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			☐ Remove
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From: Paloma Duarte

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ian effi <u>Note:</u>	we date, if other than the date of filing:	605.0207 (3 Xb) listed as the
e rec The	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the electric day after the record is filed.	arlier of:
Dated .	NOVEMBER 18 , 2024 .	
	Signature of a member or authorized representative of a member	-

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