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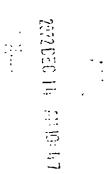
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COVER LETTER

	istration Se sion of Cor		,		
	Carriagi	E BEACH LLC		. •	•
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		CARLOS RUBINO			
			Name of Person		_
			Firm/Company	 	2072 DIC 3; ;-
	702 SE 2ND AVENUE, APT. 405				
			Address		
		DEERFIELD BEACH. FL	. 33441		÷ 13
			City/State and Zip Code		
		hylanders61@yahoo.com			-1-
		E-mail address: (to be used for future annual report no	titication)	
For further in	formation co	oncerning this matter, please c	all:		
CARLOS RU	JBINO		954 887-9055 at ()		
	Name of	f Person		ne Telephone Numb	er
Enclosed is a	check for th	ne following amount:			
■ \$ 25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	Filing Fee. cate of Status & cd Copy cal copy is enclosed)
	ling Addres gistration S		Street Address:	ection	
		orporations	Registration So Division of Co		
P.O. Box 6327		The Centre of			
Tallahassee, FL 32314			2415 N. Monro	be Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARRIAGE BEACH LLC		
(<u>Name of the Lim</u>	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Florida document numberL19000026204	Liability Company were filed on $\frac{01/2}{2}$	and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>·e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl		2022 E
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office addr		cords, enter the name of the new register
Name of New Registered Agent:	CARLOS RUBINO	
New Registered Office Address:	702 SE 2ND AVE, Apt. 405	
	Enter Florid	la street address
	DEERFIELD BEACH	Florida ³³⁴⁴¹
	Cin	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 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 removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CARLOS RUBINO	702 SE 2ND AVE, apt 405, Deerfield Beach, FL 3344	11 _ ∃ Add
			_ □Remove
			_ Change
			_ 🗆 Add
			Remove 2022 Change
			Add Remove
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ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot get. If the date inserted in this block does not meet the timent's effective date on the Department of State's	he applicabl	date of filing o e statutory fi	r more than 90 ling requiren	(option days after fil nents, this d	ling.) Purs	uant to 605.02 tot be listed
tord specifies a delayed effective date, but not an effiled.	fective time	, at 12:01 a.r	n. on the ear	ier of: (b)	The 90th	h day after tl
December, 09	22					
Claria & Dubino Signature of a member	to 100 minute 2 Pro	ad man	· · · · · · · · · · · · · · · · · · ·			<u>_</u>

Filing Fee: \$25.00