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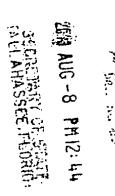
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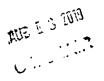




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COVER LETTER

Section orporations		æ.
Name of Lim	COMO LLC ited Liability Company	The second secon
	-	STATE OF THE PARTY
pondence concerning this matter	to the following:	U,
Rozer	Name of Person	vire
- Fla (Pordo LLC Firm/Company	
54	Dominican &	24
Bran	Ford CT 0640 City/State and Zip Code)5
CASTRO 09 2 E-mail address: (7 @ MSN COM to be used for future annual report notifi	ication)
concerning this matter, please ca	all:	
e McGoire	at (914) 887_	8132
of Person	Area Code Daytime	: Telephone Number
the following amount:		
☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Name of Lim Name of Lim of Amendment and fee(s) are subspondence concerning this matter ROZEY Flac Stan CASTRO 092 E-mail address: (a concerning this matter, please concerning this matter.	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. pondence concerning this matter to the following: ROZENI CE MCC Name of Person Fla Cordo LLC Firm/Company 54 Dominican K Address Branford CT 0640 City/State and Zip Code Castro 927 Omen. Com E-mail address: (to be used for future annual report notification of Person at Q14 883 Area Code Daytime the following amount: 1 \$30.00 Filing Fee & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ElaCondo	1 1.C	Control of
(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears on our records.)	30
The Articles of Organization for this Limited Liability Company were Florida document number <u>L19000574</u> .		and distinct
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
_		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	: address on our records, <u>ent</u>	er the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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 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 ac or removed from our records: MGR = Manager AMBR = Authorized Member Title **Address Type of Action** Name Gerald Paprocki 54 Dominican Road Add

Branford CT 00405 DRem ☐ Change □ Add □ Remove ☐ Change ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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If an effective Note: If the	date, if other than the date of filing:	
	I specifies a delayed effective date, but not an effective time, at 12:01 th day after the record is filed.	a.m. on the earlie
Dated	18/04/2019.	
_	Rosenfide McGuine Signature of a member or authorized representative of a member	
	, , t	

Page 3 of 3

Filing Fee: \$25.00