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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAFAEL TONETTO LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

RAFAEL TONETTO LLC		
(Name of the Limited Liability (A Florida)	Company as it now appears on our records.) Lucited Liability Company)	
(A Florida Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 4/25/2019 and assigned Florida document number L19000106137 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 Company," the designation "LLC" or the abbreviation "LIC" or the abbreviation "LIC" or the abbreviation "LIC" Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the ab	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	70 -
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Enter new mailing address, if applicable:		<u> </u>
(Malling address MAY BE A POST OFFICE BOX)		
		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
-	, Florida, Cirv	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>	Name	Address	Type of Action
MGR	Sylvana Farhat	1748 Caribbean View Terrace Unit 20	
		Kissimmee, FL 34747	
			■ Remove
			Change
			Add
			☐ Remove
			20 Change
			PR 2
			Add NO
			Q Remove
			Change
			☐ Remove
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. If amendin	g any other	nformation,	enter chi	ange(s) ber	e: (Attach	additional	sheets, if	necessary. -) 	_	
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the record) The 90ti	specifies a h day after	delayed eff the record	ective di Is filed.	ate, but n	ot an effe	ctive tim	e, at 12:0	01 a.m. (on the ea	rlier of:	
Dated Apri	1 26			2019							
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(Courtney Nan	ke. Attorney is	Fact								
-	·			Typed or prin	nted name of	iguce					

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