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| PICK-UP                 | WAIT              | MAIL   |
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| (Bu                     | siness Entity Nan | ne)  |
|                         |                   |  |
| /Do                     | cument Number)    | <u>.                                    </u> |
| (50                     | cument Number)    |  |
|                         |                   |  |
| Certified Copies        | _ Certificates    | s of Status                                  |
|                         |                   |  |
| Special Instructions to | Filing Officer    |  |
| Special instructions to | ining Onicer.     |  |
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T. MATTHEWS APR -8 2022

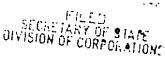
## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |   |   |  |
|--|---|---|--|
| SUBJECT: KE                            | FALONIA LL                                | C   |  |
|  | Name of Lim                               | ited Liability Company  | ,  |
| The enclosed Articles of               | Amendment and fee(s) are sub              | mitted for filing.  |  |
| Please return all correspo             | ondence concerning this matter            | to the following:   |  |
|  | CARLOS TA                                 | WTO MIRANDA<br>Name of Person                                       | ·  |
|  | FAUSTO COMI                               | MERCIAL REAU Firm/Company   | <b>/</b>   |
|  | 1631 SW 7                                 | •   |  |
|  |   | Address   |  |
|  | MIAMI, FL                                 | City/State and Zip Code   |  |
|  |   | 76 COMMERCIAL. CONTROL TO be used for future annual report not      | itication)   |
| For further information c              | concerning this matter, please ca         | all:  |  |
| <del></del>                            | VSTO MIRANDA of Person                    |   | 1 - 2258<br>ne Telephone Number  |
| Enclosed is a check for the            | he following amount:                      |   |  |
| □ \$25.00 Filing Fee                   | S30.00 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) |
| Mailing Address Registration           |   | <u>Street Address:</u><br>Registration Se                           | ection   |

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



|   |              | 01177110  |
|---|--------------|-----------|
| KEFALONIA LY  | 22 MAR 28    | PM 12: 15 |
| (Name of the Limited Liability Company as it now appears on our recor | <u>ds.</u> ) |           |
| (A Florida Limited Liability Company)                                 |              |           |
|   | -            |           |

| The Articles of Organization for this Limited 1   | Liability Company were filed o    | on 4/29/19                          | and assigned          |
|---|-----------------------------------|-------------------------------------|-----------------------|
| Florida document number <u>L 19000</u>  | 112524                            | 7 /                                 |                       |
| This amendment is submitted to amend the fol  | llowing:                          |                                     |                       |
| A. If amending name, enter the new name   | of the limited liability compa    | <u>nv here</u> :                    |                       |
| The new name must be distinguishable and contain the  | words "Limited Liability Company. | the designation "LLC" or the        | abbreviation "L.L.C." |
| Enter new principal offices address, if appli   | icable:                           |                                     |                       |
| (Principal office address MUST BE A STRE  | ET ADDRESS)                       |                                     |                       |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE             | <u></u>                           |                                     |                       |
| B. If amending the registered agent and/or agent and/or the new registered office addresses | ess here:                         |                                     |                       |
| Name of New Registered Agent:   | CARLOS FAU                        | ISTO MIRAND                         | <b>VA</b>             |
| New Registered Office Address:  |                                   | STREET<br>er Florida street address | <del></del>           |
|   | MIAMI                             |                                     | 33/35                 |
|   | 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 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 |
|-------------------------|--------------------------|----------------------------|----------------|
| AMBR                    | ARTURD DETEGA            |                            | □Add           |
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| • <b>A</b> C - <b>b</b> | CANIAC THAIRT            | 1671 sw71+ Mioni, Fl 33135 | □Change        |
| MEIR                    | CARLOS TAUSTO<br>MIRANDA | 10,1,20,1                  | X!Add          |
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|  |                         |                       |                          |   | •                       |
| ffective date, if other<br>an effective date is listed,<br>lote: If the date inserte<br>ocument's effective date | ed in this block does n | ot meet the applicab  | due of thing of more in- | (optional)<br>an 90 days after filing<br>uirements, this date | .) Pursuant to 605.0207 |
| record specifies a delay   | red effective date, but | not an effective time | e, at 12:01 a.m. on the  | e earlier of: (b) T   | he 90th day after the   |
|  |                         |                       |                          |   |                         |
| ated 7/15/21   |                         |                       |                          |   |                         |
| l is filed.  | 7/3/                    |                       | .•                       |   |                         |

grade Arthur Burner