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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Number : I20120000052

Account Name : JELEN ACCOUNTING SERVICES, INC

Phone

: (305)591-9180

Fax Number

: (305)591-9167

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

Email Address:info@jelenaccounting.com

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the 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 O5/13/2019 and assigned Florida document number L19000129024  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 "LLC."  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 address on our records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Zip Code | TYCOONS BODEGON LLC   |   |   |  |
|--|---|---|---|--|
| 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 "LLC."  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 address on our records, enter the name of the new regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | (Name of the Limited Liability Com<br>(A Florida Limite   | npany as it now appears on<br>ed Liability Company) | our records.)                             |  |
| 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 "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 address on our records, enter the name of the new regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  |   | ny were filed on 05/13/2                            | 019 and assigned                          |  |
| 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 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 address on our records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | his amendment is submitted to amend the following:  |   |   |  |
| 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 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:  New Registered Office Address:  Enter Florida street address  Florida  | A. If amending name, <u>enter the new name of the limited li</u>  | ability company here:                               |   |  |
| Enter new mailing address, if applicable:  (Mailing 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:  New Registered Office Address:  Enter Florida street address  Florida  | The new name must be distinguishable and contain the words "Limited Li  | ability Company," the design                        | lation "LLC" or the abbreviation "L.L.C." |  |
| Enter new mailing address, if applicable:  (Mailing 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 regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  | Enter new principal offices address, if applicable:   |   |   |  |
| (Mailing 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 regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | Principal office address MUST BE A STREET ADDRESS   | <u> </u>  |   |  |
| Mailing 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 regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  |   |   | Banca Ti                                  |  |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | <del>*</del>  |   | 2   |  |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new regist agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | Mailing address MAY BE A POST OFFICE BOX)   |   |   |  |
| Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address , Florida  | B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: | ce address on our reco                              |   |  |
| New Registered Office Address:  Enter Florida street address , Florida   | · · · · · · · · · · · · · · · · · · ·   |   | ·   |  |
| Enter Florida street address, Florida  | Name of New Registered Agent:   |   |   |  |
| Enter Florida street address, Florida  | New Registered Office Address:  |   |   |  |
| , Florida  |   | Enter Florida street address                        |   |  |
| Ciţ <sub>i</sub> , Zip Code  |   |   | , Florida                                 |  |
|  |   | Ciņ   | Zip Code                                  |  |
|  |   | aguar to out in this can                            | ecity. I further agree to comply wit      |  |

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.

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DocuSign Envelope ID: D9C2204F-FA11-4AB7-B46E-D8F6E38421BB are name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>             | <u>Address</u>             | Type of Action |
|--------------|-------------------------|----------------------------|----------------|
| AMBR         | GOMEZ CONTRERAS, YOSLIN | 4851 NW 79TH AVENUE        | <b>=</b> Add   |
|              |                         | SUITE 5                    | □Remove        |
|              |                         | DORAL, FL 33166            | □Change        |
| AMBR         | BARONI TERAN, JONNATHAN | 4851 NW 79TH AVENUE        | □Add           |
|              |                         | SUITE 5                    | Remove         |
|              |                         | DORAL, FL 33166            | □Change        |
| AMBR         | PEREZ DABIOT, ELIAS     | 8181 NW 36 STREET STE 13AB | □Add           |
|              |                         | DORAL, FL 33166            | = Remove       |
|              |                         |                            | □Change        |
|              |                         |                            |                |
|              |                         |                            | □Remove        |
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| Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D | ock does not me        | eet the applica  | o date of filing o | r more than 90 da<br>ling requiremen | (optional)<br>ys after filing.) Purs<br>its, this date will r | uant to 605.0207<br>not be listed as |
| e record specifies a delayed effectiv<br>rd is filed.   | e date, but not a      | an effective tir | ne, at 12:01 a.r   | n. on the earlie                     | of: (b) The 90th  | h day after the                      |
|   |                        | 2020             |                    |                                      |   |                                      |
| NOVEMBER, 20  |                        |                  |                    |                                      |   |                                      |
| Dated NOVEMBER, 20  PEDIO MIKU  | EE<br>Signature of a m |                  |                    |                                      |   |                                      |