

11/12/21, 10:40 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L19000183577

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TPBS CORP
Account Number : I20190000112
Phone : (786)389-2779
Fax Number : (305)356-3688

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

Email Address: _____

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CARTOYS ELECTRONIX, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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Corporate Filing Menu

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H210004194073

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

CARTOYS ELECTRONIX LLC

(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 07/16/2019 and assigned
Florida document number L19000183577.

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 "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 agent and/or the new registered office address here:

Name of New Registered Agent: WILSON L RIOS BUJAK

New Registered Office Address: 750 SW 2ND ST APT 1

Enter Florida street address

MIAMI, Florida 33130
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

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	EDDUIN DEYAN	4759 NW 72ND AVE	<input type="checkbox"/> Add
		MIAMI, FL 33414	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Franceleste Maiz Gonzalez	1108 Turtle Creek Dr	<input type="checkbox"/> Add
		Asheville NC 28803	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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INTERNATIONAL AFFAIRS SECTION

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WASHINGTON, D.C.

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Dated 17 November, 2021

Signature of a member or authorized representative of a member

Wilson L Rios Bujak

Typed or printed name of signee

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