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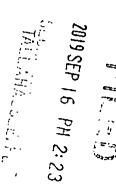
(Requestor's Name)
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COVER LETTER

SUBJECT:	Land 2 Land Import/Expor	t, LLC.		
	Name of Lin	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	David Anthony Mariano Jr.			
	Land 2 Land Import/Export	Name of Person		
	5125 Palm Springs Blvd. L	Firm/Company Init# 2206		
Address Tampa FL, 33647				
	sage.dave@yahoo.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notifi-	cation)	
For further information	concerning this matter, please c	all;		
David Anthony Mariar	no Jr.	856 651-8326		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	☐ \$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)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

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Registration Section Division of Corporations

TO:

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

Land 2 Eand Import/Export, LLC.		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on August 5, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
		20
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation .L.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	.	5 6
(Fraction office matess 1903) BE A STREET ADDITION		
		2: 2:
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	City	da Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete		• •

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	David Anthony Mariano Jr.	5125 Palm Springs Blvd.	
———			
		Unit #2206	
		Tampa FL, 33647	
			Change
			□ Remove
			B Kellove
			Change
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lf an el' <u>Note:</u>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 90 th day after the record is filed.
Dated	rignature of a member or authorized representative of a member
	David Anthony Mariano Jr.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00