

	From: eFax Cuevas L	.a¥	10-11-19	4:33pa p.2
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RETAL HOL	DINGS LLC		The second state	an ga ga an An ga ga an
	(Name of the Limited Liability Company as it a (A Florida Limited Liability (	iow appears on our r Company)	scordin) Astra Granden	1-1-30111394
The Articles of Organization	on for this Limited Liability Company were fi L19000208124	led on 08/20/2019	14 BD	d assigned
This amendment is submit	ted to amend the following:			
A. If amending vame, <u>er</u>	nter the new name of the limited liability co	<u>mpany here</u> :		
The new name must be distingu	ishable and contain the words "Limited Liability Com	pany," the designation	"LLC" or the abbreviation	on "L.L.C."
	ces address, if applicable:			
(Principal office address)	MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing addr (Mailing address MAY B	ess, if applicable:			
(Mailing address MAY B B. If amending the r		address on our r	ecords, <u>enter the n</u>	name of the new
(Mailing address MAY B B. If amending the registered agent and/or	<u>BE A POST OFFICE BOX)</u>  epistered agent and/or registered office a	address on our r	ecords, <u>enter the </u>	aame of the new
(Mailing address MAY B B. If amending the re- registered agent and/or Name of New F	E A POST OFFICE BOX) egistered agent and/or registered office a the new registered office address here:	address on our r EmerFlorida stree		name of the new
(Mailing address MAY B B. If amending the registered agent and/or Name of New F	BE A POST OFFICE BOX)		uddress Florida	Earne of the new

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply which 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

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Title	Name	Address	Type of Action
	ANDREW CUEVAS	7300 N KENDALL DR	
AMBR			Add
		SUITE 680	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
			C Remove
		MIAMI, FL 33156	
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			D Add
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			🗆 Велюче
			<u></u>
			_ Change
			Add
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			□ Remove
			Change

To: 8506176383

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If amending any other informatio	on, enter change(s) nere: (Atta	ся аланняни эпесь, у песезо	****
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Effective date, if other than the (If an effective date is listed, the date trans	e date of filing:	(option) of filing or more than 90 days after f	nal) iling.) Pursuant to 605.0207 (3)(b)
(If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this bl document's effective date on the D	IUEX CIGDA DOL DIDEL DIO SPINICAGINA O	tatutory filing requirements, this	date will not be listed as the
f the record specifies a delayer	d effective date, but not an	effective time, at 12:01 a	.m. on the earlier of:
b) The 90th day after the rec	cord is filed.		
Dated	2019		
(A) Mosel	Signature of a member or authorized	representative of a member	· ·
New March			
Rosalba Anas as MHR	t of TAURUS INVESTMENTS LL Typed or printed nam		<u> </u>

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