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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Codification of Status |
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| Special Instructions to Filing Officer: |
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| TO: Registration Se Division of Cor | | | |
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| SUBJECT: | Babalu Au Name of Limit | E LLC ded Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are subi | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | Evne | sto Camac | ho |
| | _ | Name of Person Aye LLC Firm/Company | |
| | 13368 SW | 288th 5t | |
| | Hon | nestead, F | L 33033 |
| | SALES @ boto | City/State and Zip Code Nica mamo | RUCINA · COM |
| For further information co | oncerning this matter, please ca | | |
| Evnesto Name o | Camacho | at (305) Area Code | 803 - 2959 Daytime Telephone Number |
| Enclosed is a check for th | ne following amount: | | |
| ₹ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is encl.) | Certificate of Status & |

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

Street Address: 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

Richard Aug 110

| DADAIU THE LL | |
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| (Name of the Limited Liability Compa (A Florida Limited L | ny as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L19000213209</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability | were filed on 08 20 2019 and assigned |
| | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity 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) | 13368 SW 288th St 01 Homestead, FL 33033 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 13368 SW 288+L St Homestead, FL 33033 |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, enter the name of the new registered |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | , Florida |
| | 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 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

| MGR Maria Fdel Dago 13368 SW 288th St Homestead, FL 33033 XR | add temove |
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| Effective date, i | f other than the d s listed, the date must | ate of filing | : 10 / 1 | 2 202 | O special beautiful and the second | _ (optional) | uswant to fil | กร ควกร |
| Note: If the date | inserted in this bloc tive date on the Dep | k does not m | ect the applic | able statutory fi | ling requireme | ents, this date wi | II not be lis | sted as |
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| ne record specifies ord is filed. | a delayed effective | date, but not a | an effective ti | me, at 12:01 a.i | n. on the earli | er of: (b) The 9 | ≀0th day aft | ter the |
| | ember | 10 | 2020 | | | | | |