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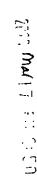
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COVER LETTER

Tallahassee, FL 32314

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TO: Registration Sec Division of Corp			
SUBJECT: Latin	10'S M & J CE	Impany LLC	
Source:	Name of Limit	ed Liability Company	
The enclosed Articles of A	amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	Sterlynn P	Name of Person	
		Firm/Company	
	5021 NN 760th	PICVE. Address	
	pompono bear	N. FL, 83073 City/State and Zip Code	2007 E
	Sterlynn Me E-mail address: (1	o be used for future annual report notific	eation)
For further information co	oncerning this matter, please ca	all:	:
Sterlynn Name of	Person	at (<u>786</u>) <u>327</u> Area Code Daytime	IUG5 7
Enclosed is a check for the	ne following amount:		
□ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration (Street Address: Registration Sec	etion _
Division of C	Corporations	Division of Cor The Centre of T	porations allahassee
P.O. Box 632 Tallahassee		2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Latino		Compa	ny LLC	
(Name of the Limite	d Liability Company as A Florida Limited Liabili	it now appears on our res ty Company)	cords:)	
The Articles of Organization for this Limited Lia Florida document number <u>L190002815</u>	ibility Company were 5 65	filed on 11/23/2	DDI and assign	ed
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability (company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liability Co	ompany," the designation "	LLC" or the abbreviation "L.L.C.	."
Enter new principal offices address, if applica	ble:		1.3	
(Principal office address MUST BE A STREET				
			• 1	
Enter new mailing address, if applicable:	_		-	
(Mailing address MAY BE A POST OFFICE)	<u> </u>			
				_ -
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office addr s here:	ess on our records, <u>er</u>	nter the name of the new r	<u>egistered</u>
Name of New Registered Agent:	Sterlynn	, Parido		
New Registered Office Address:	5022 N FR	Enter Florida street on	ddress	<u></u>
	<u>Lighthou</u>	se foint	, Florida <u>35004</u> 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 N

gnature of New Registured Agent

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

Title	<u>Name</u>	Address	Type of Action
	Sterlynn Ruido	Address for SO2 N Federal Hwy, Lighthage	
			□Remove
			□Change
MBR	Mojano Nino, Santago)	□Add
			Remove
			□Change
			□ Add :
			□Remoye
			☐Change
			□Add
			□Remove
			□Change
			□Add
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			□Change
			□Add
			□Remove
			□ Change

	<u> </u>
	::
	."
fective date, if other than the date of filing: 1/2020 in effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory filing output in the date on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 605.0 ing requirements, this date will not be listed
record specifies a delayed effective date, but not an effective time, at 12:01 a.m is filed.	n, on the earlier of: (b) The 90th day after
ated $3/14$ 2023	

Filing Fee: \$25.00