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COVER LETTER

TO:

TO: Registration So Division of Cor			
CUDIECT.	Solosa Te	chnologies LLC	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Jose G. Solares	
		Name of Person	
		MGR	
		Firm/Company	
	2645 Executive Park Dr. S	Suite 335	
	<u> </u>	Address	
	Weston FL, 33331		
		City/State and Zip Code	22
	soograzie@gmail.com		3 <u> </u>
	E-mail address: ((to be used for future annual report notification)	$i\mathcal{Z}$
For further information of	oncerning this matter, please c	all:	<u>ب</u>
Jose G. Solares		954 3045159 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>ાં</u> ક
Name o	of Person	Area Code Daytime Telephone Number	. r 7
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	
Mailing Address		Street Address:	
Registration S Division of C		Registration Section Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Solosa Technologies LLC	
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on	09/25/2019 and assigned
lorida document number 84-3202132	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>y here</u> :
Soo Grazie LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," t	he 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)	
	2022 SF (
B. If amending the registered agent and/or registered office address on or	and the second s
gent and/or the new registered office address here:	-1 21/21
Name of New Registered Agent:	
	Dec on
New Registered Office Address:	Florida street address
12110	The second secon
City	, Florida Zip Code
City	гір Coae

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Rameliz Somosa	2645 Executive Park Dr. Suite 335 Weston FL. 3333	l ≣Add
			□Remove
			□Change
MGR	Jose G. Solares	2645 Executive Park Dr. Suite 335 Weston FL. 3333	I ≣Add
			□Remove
			DChange
			_ Add
			Co Change
			الله الله
			□ Remove
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ective date, if other than	the date of filing:			(optiona	al)	
n effective date is listed, the dat te: If the date inserted in the	his block does not mee	et the applicable				
cument's effective date on t	he Department of Stat	te's records.				
ecord specifies a delayed eff s filed.	fective date, but not ar	n effective time,	at 12:01 a.m. on	he earlier of: (b)	The 90th d	ay after th
February 14		2022	_			
	11/11/4	200				
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