

4/8/2021

Division of Corporations

219000044011

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SOPHITMIAMI LLC

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Page Count	03
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2021 APR -8 PM 5:02

Electronic Filing Menu

Corporate Filing Menu

Help

Handwritten signature and date 4/9/21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOPHITMIAMI LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/27/2019 and assigned Florida document number L19000214011

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SOPHITLIFE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9410 SW 65 STREET

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33173

Enter new mailing address, if applicable:

9410 SW 65 STREET

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33173

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ADDRESS CHANGE

New Registered Office Address:

9410 SW 65 STREET

Enter Florida street address

MIAMI

City

Florida 33173

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.

Handwritten signature of Yanet Avil

If Changing Registered Agent: Signature of New Registered 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	EDUARDO AGUILAR	9410 SW 65 STREET	<input checked="" type="checkbox"/> Add
		MAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CHANGE OF ADDRESS	9410 SW 65 STREET	<input type="checkbox"/> Add
		MAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CHANGE OF ADDRESS	9410 SW 65 STREET	<input type="checkbox"/> Add
		MAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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 STATE OF FLORIDA
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 2021 APR 08 19:49
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 2021 APR 08 19:49

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NA

Multiple horizontal lines for amending information.

2021 APR - 8 PM 4: 50
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E. Effective date, if other than the date of filing: 12/4/20 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 12/4 2020 Sophia Tomaselli

Signature of a member or authorized representative of a member

SOPHIA TOMASELLI

Sophia Tomaselli

Typed or printed name of signee