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From:

Account Name : FERNANDO JIMENO

Account Number : 074553003252

Phone : (305)826-1711 Fax Number : (305)826-1738

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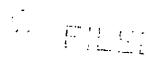
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION



BUY ALL (Name of the Limited Liability Compan (A Fiorida Limited Li	y as it now appears on our r	题 NFC - 3 P 2: 25
(A Florida Limited Li The Articles of Organization for this Limited Liability Company v Florida document numberL19000258963	vere filed on OCTOBER	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	ree to act in this capaci	ty. I further agree to comply with ties, and I am familiar with and ir 605, F.S. Or, if this document is firm that the limited liability

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

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>	Address	Type of Action
MGR	PABLO S MOYANO	9601 SW 142nd AVE STE 1004	🖼 Add
		MIAMI, FL 33186	□Remove
			Change
			□Add
			Петюче
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ti amendid any order unorma	ation, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
_	(ontional)
Effective date, if other than the (If an effective date is listed, the date of Note: If the date inserted in this lead to decument's effective date on the lead to the lead	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.6 block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
he record specifies a delaye The 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. on the earlie scord is filed.
Deted NOVEMBER 25	2019
	Signature of a member of authorized representative of a member
	PABLO MOYANO

Page 3 of 3

Typed or printed name of signee