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DATE:

07/05/22

NAME: TERREMOTO PLANET LLC

TYPE OF FILING: AMENDMENT

COST:

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

TO: Registration S Division of Co			
	Planet LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Maria Soledad Acuña Sak	redo	
		Name of Person	
		Firm/Company	
	868 Grazie Loop		
	Davenport, FL, 33837	Address	
	Davenport, FL, 33637	City/State and Zip Code	
	soledad@terremotoplanet.c		
	E-mail address: (to be used for future annual report no	etification)
For further information	concerning this matter, please c	all:	
María Soledad Acuña Salcedo		407 795-2772	
Name	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address: Registration S	ection
Registration Division of (Division of Co	
P.O. Box 63:	27	The Centre of	Tallahassee
Tallahassee.	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JUL -5 PH 12: 22

Terremoto Planet 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 ______15, 2020 _____ and assigned Florida document number L20000010589 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 868 Grazie Loop Enter new principal offices address, if applicable: Davenport, FL, 33837 (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 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: New Registered Office Address: Enter Florida street address 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 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	Comercializadora e Inversiones Doña Magdalena SpA	Av. Caupolican 441. Temuco, Chile	= Add
			□Remove
MGR	Bernardita Andrea Acuña Salcedo	Av. Caupolican 441, Temuco, Chile	■Add
			□Remove
			Change
MGR	Juan Antonio Cespedes Ríos	868 Grazie Loop, Davenport, Fl, 33837	■Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change
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			□Change

		
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record sp is filed.	specifies a delayed effective date, but not an effective time, at 12 l.	2:01 a.m. on the earlier of: (b) The 90th day after th
Inn	me 30, 2022	
tod		
ated	Signature of a member or authorized repi	