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COVER LETTER

		ion Section of Corporations	·	a - , .
SHRIF	Cyna	ri International LLC		
SOBJEC		Na	ime of Limited Liability Company	
The encl	osed Anic	les of Amendment and fee(s) are submitted for filing.	
Please re	eturn all co	rrespondence concerning th	nis matter to the following:	
		Ivan Dynamo De	Jesus	
			Name of Person	
			Firm Company	
		13951 SW 66th 5	ST Apt 909-A	
			Address	,
		Miami, FL 3318.	3	
			City/State and Zip Code	
		ivan.dejesus'@live E-mai	e.com Faddress: (10 be used for future annual report notification	.)
For furth	ier inform	ation concerning this matter	, please call:	
Ivan De			305 510-0877 at () Area Code Daytime Telep	
	ì	Name of Person	Area Code Daytime Telep	hone Number
Enclosed	d is a chec	k for the following amount:		
₩ \$25.	.00 Filing	Fee S30.00 Filing 1 Certificate of	<u> </u>	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		Address: ntion Section 1 of Corporations	Street Address: Registration Section Division of Corporat	ions
	P.O. Bo		The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cynari International LLC			
(<u>Name</u> of the Limi	ted Liability Compa (A Florida Limited)	inv as it now appears on our records.) Diability Company)	- FD
The Articles of Organization for this Limited L	iability Company	were filed on 01/27/2020	and assigned
Florida document number 1.20000031938			
This amendment is submitted to amend the following			PH 7: 24
A. If amending name, enter the new name of	of the limited liab	ility company here:	že.
GAMI International LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7855 NW 12th ST #216	
(Principal office address MUST BE A STREI		Miami, FL 33126	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre	•	address on our records, <u>enter the</u>	name of the new registered
	Ivan De Jesus		
Name of New Registered Agent:			
	13951 SW 66th	n ST Apt 909-A	
Name of New Registered Agent: New Registered Office Address:	13951 SW 66th	r ST Apt 909-A Enter Florida street address	
	13951 SW 66th		33183

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
	w-1		
			IRemove
			□Change
			□Remove
			IChange
			JAdd
			□Remove
			□Change
		· -	
			□Remove
			□Change
			DRemove
			□Change
			□Remove
			□Change

This is a simple name change				
				
				
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ffective date, if other than the	date of filing:		(optio	nat)
an effective date is listed, the date mus lote: If the date inserted in this bl	t be specific and cannot be p ock does not meet the arm	nor to date of filing or olicable statutory fili	more man 90 days after t ing requirements, this	date will not be listed as
ocument's effective date on the De	epartment of State's reco	rds.		
record specifies a delayed effective	e date, but not an effectiv	e time, at 12:01 a.m	i, on the earlier of: (b)	The 90th day after the
I is filed.				
February 5th ated	2021	·		
J23	Signature of a member or a	uthorized representation	ve of a member	

Filing Fee: \$25.00