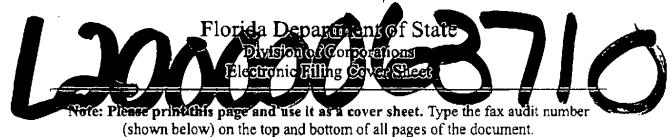
3/26/2021

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839 Phone Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIG GRUPO PIERCON INTERNACIONAL LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	ompany)
The Articles of Organization for this Limited Liability Company were file Florida document number L20000063710	ed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	my," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	g-gr.
	<u> </u>
<del>- "</del>	26
B. If amending the registered agent and/or registered office address of	on our records, enter the name of the new regis
event and/or the new registered office address here:	w. At
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
·	Enter Florida street address
•	
	, Florida

new Registered Agent's Stynature, is changing Registered Agent:

GRUPO PIERCON INTERNACIONAL LLC

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>	Name	Address	Type of Action
MGR	BRUCCELEC G PIERUCCINI Z.	9400 SW 171 ST PL MIAMI,FL 33196	
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Effective data if other	ur them the data of	r Minor		Cometan	-n
(If an effective date is listed <u>Note:</u> If the date insert document's effective de	ied 12 Unis Diock does	s not enect the app	iscable statutory filin	ore than 90 days after fi g requirements, this d	all) ing.) Pursuent to 605.0207 ( ate will not be listed as t
ne record specifies a dela ord is filed.	iyed effective date, b	et not an effective	e time, et 12:01 a.m.	on the carlier of: (b)	The 90th day after the
Dated MARCH 25		2021			
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		17			

Typed or printed name of signer