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Division of Corporations

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From:

Audount Name : CLAFA GIRALDO ENROLLED AGENT

Account Number : 119993080017 Phone : (305)485-9300 : (305)485-1096 Fax Number

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Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHAT SMS PRO, LLC

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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHAT SMS PRO, LLC			
(Name of the Lin	ited Liability Comp (A Florida Limited	tay as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited Florida document number 1.20000065486		were filed on 03/02/2020	And assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	icable:	N/A	·
(Principal office address MUST BE A STRE	ET ADDRESS)		<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>E BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records, <u>ente</u>	er the name of the new register
Name of New Registered Agent:	N/A		
New Registered Office Address:	<del>-</del> · · ·	Enter Florida street addr	PN
		. <b>I</b>	Florida
		Сиу	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.

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	EUGENIO CABRERA	15806 Bent Creek Rd	<b>=</b> Add
		Wellington, FL 33414	☐Remove
			□Change
	·	<del></del>	□Remove
			(1) Change
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to the fire date on the frep.				
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ted AUGUST 27 ·	2021		7	
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Sig	gnature of a member or turns	offized representativ	e of a member	