Florida Department_of State

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From:

Account Name : KCO SERVICES, LLC Account Number : I20200000013

: (954)744-6605 Phone Fax Number : (833)648-2730

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Email Address: gaudyegimenezg@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DISTRIBUIDORA EMISAN CA, LLC

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SEP 12 2023 K. Brumbley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DISTRIBUIDORA EMISAN CA, ELC			
(Name of the Limited Liability Comps (A Florida Limited)	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 1.20000066777	were filed on and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	3655 NW 115th Ave Ste 17		
(Principal office address MUST BE A STREET ADDRESS)	Doral, FI 33178		
	2660 VIVI 1164		
Enter new mailing address, if applicable:	3655 NW 115th Ave Ste 17		
(Mailing address MAY BE A POST OFFICE BOX)	Doral, Fl 33178		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new register		
	SE		
New Registered Office Address:	Enter Florida street address Florida		
New Registered Agent's Signature, if changing Registered Agent:	City — Zip Code		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pering filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

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
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Effective date, if other than the date an effective date is listed, the date must be Note: If the date inserted in this blocklocument's effective date on the Department.	k does not meet the applicable si	(optional) of liling or more than 90 days after filing.) Pursuant to 605. atutory filing requirements, this date will not be liste	.0207 ed as
record specifies a delayed effective of is filed.	late, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day after	the
August 29	2023		
-	Mary .		
Si	gnature of a member or authorized i	coresentative of a member	