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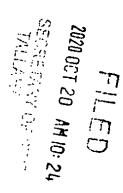
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LH. 11/20/20

COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: KARAT INTERNATIONAL, LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
RAFAEL TRUJIIO Name of Person
KARAT INTERNATIONAL LLC Firm/Company
7412 N.W 108 Th PATH Address MIAMI, FLA 33178 City/State and Zip Code
MIAMI, FLA 33178 City/State and Zip Code
RAFAELT. CONSULTING @ 9mail - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RAFAEL TRUJIII0 at (786) 301-4581 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARAT INTERNATIONAL	<u> </u>
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on $3-/8$	2020 and assigned
Florida document number <u>L2000008445</u> 3	
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	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	\$ 202
(Principal office address MUST BE A STREET ADDRESS)	三三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二
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Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or registered office address on our records, agent and/or the new registered office address here:	enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street	adaress
City	Florida 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	v. I further agree to comply wit

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with anc accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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	CAROLYN TRUJIIID	7412 N.W. 108 & POTH MIAMI, FLA 33178	L ☑Add
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			_ Change
			□ Add
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m eff o <mark>te:</mark>	(optional) betive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
ecor is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ted	10-12-2020
	Signature of a member or authorized representative of a member
	RAFAEL TR VJ1! 10 Typed or printed name of signee