Division of Corporations

Florida Department of State

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Division of Corporations

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From:

Account Name : FASTKIT CORP Account Number : I201000000009

Phone : (305)599-0839 Fax Number : (305)592-9591

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

교통점 공항

BZT LLC AMND/RESTATE/CORRECT OR M/MG RESIGN APIS FAMILY LLC

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OCT 1 5 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APIS FAMILY LLC	,	
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were	filed on 06/29/2020	and assigned
Florida document numberL20000189422		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Co	tipany," the designation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		· -
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office addre	ss on our records, enter the name of	the new registered
agent and/or the new registered office address here:		
		(~)
Name of New Registered Agent:		(5)
New Parisonal Office Add		C
New Registered Office Address:	Enter Florida street address	
		C': -
	, Florida /in: Z	ip Code
New Registered Agent's Signature, if changing Registered Agent:		ربې
· 	_	
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfo	act in this capacity. I further agree t	o comply with the
accept the obligations of my position as registered agent as provide	led for in Chapter 605. F.S. Or if th	iur with and is document is
being filed to merely reflect a change in the registered office address	ess, I hereby confirm that the limited	l 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
Manager	PEDRO M GARCES	11729 SW 110 TERR	
		MIAMI, FL 33186	∑ Remove
			□ Change
			□Add
			□ Remove
			Change
			□Remove
			□Change
			
		<u> </u>	(] Remove
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ffoot	re date, if other than the date of filing: (optional)
fan eff <u>Vote:</u>	(optional) tive date, if other than the date of filing: tive 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 605.02 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed in the Department of State's records.
rccore	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
Dated .	10/14/2024
	\ ``\ \ Y '⊥_\

Typed or printed name of signee