(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MBA ACTIVATION, LLC

Account Number : I20130000007 Phone : (786)439-9847 Fax Number : (786)345-0666

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

Email Address: serqueipm@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA TIZA PIZZA LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LA TIZA PIZZ					
(Name of the Lim	(A Florida Limited)	iny as it now appears Liability Company)	on our records.)			
The Articles of Organization for this Limited I Flotida document number	were filed on	08/20/2020	and assigned			
This amendment is submitted to amend the fol						
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>·</u>			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the de	signation "LLC" or the ab	breviation "I. L.C."		
Enter new principal offices address, if applicable:		741 SW 114TH CT.				
(Principal office address MUST BE A STREET ADDRESS)		SWEETWATER, FL 33174				

Enter new mailing address, if applicable:		741 SW 114TH CT.				
(Mailing address MAY BE A POST OFFICE BOX)		SWEETWATER, FL 33174				
			····			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office a ess here:	uddress on our re	cords, <u>enter the nam</u>	e of the new registere		
Name of New Registered Agent:	JENNIFER	GONZALEZ H	ERNANDEZ			
New Registered Office Address:	741 SW 114					
	•	Enter Florie	da street address .			
	SWEETWA		, Florida <u>33</u>			
		City		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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member Title Name Address Type of Action MGR VICTOR FERNANDEZ RIVERA 1690 E 5TH AVE. _____Add HIALEAH, FL 33010 Remove USA _____ □Change JENNIFER GONZALEZ HERNANDEZ MGR 741 SW 114TH CT. SWEETWATER, FL 33174 __ □Remove USA **LUIS E. FERNANDEZ BORRERO** MGR 741 SW 114TH CT. SWEETWATER, FL 33174 Remove _ □Change USA bb∧□ __ 🗆 Remove \square Add □Remove _____ □Change _____ □ Add □Remove □Change

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n offective date te: If the day	e is listed, the date te inserted in thi	must be specific a	ing: 12/1 and cannot be prior to meet the applier of State's records.	to date of filing or	more than 90 da	(optional) ys after filing.) Pa us, this date will	rsuant to 605.020 I not be listed a
cord specifie s filed.	s a delayed effe	etive date, but n	ot an effective tii	ne, at 12:01 a.n	n, on the cartic	of: (b) The 90	Oth day after the
	DE	CEMBER 12	2023				
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