Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations Fax Number : (859)617-6383 From: Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOTOLIOTO, LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Totolioto, L				
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on outled Liability Company)	r records,)		
The Articles of Organization for this Limited Liability Comp Florida document number <u>L20000283113</u>	any were filed on 9/10	0/2020	and assig	picd
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 L	iability Company," the designati	on "LLC" or the abb	reviation "L.L.	C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u> </u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2020 NOV -5 A	<u> </u>
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records	s, enter the name	of the new	
Name of New Registered Agent:	· 			<u>.</u>
New Registered Office Address:	Enter Florida stre	et address		 -
	City	, Florida	Zip Code	
	 y			

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

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
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
		©Remove	
			Change
			□Add
			□Remove
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			©Change
			□Remove
			t Change

D. II amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
Note: If	edate, if other than the date of filing:
f the record s ecord is filed	pecifies 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	November 4, 2020.
	Signature of a member of authorized representative of a member
	Victor Maldonado Typed or printed name of signee

Filing Fee: \$25.00