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To:

division of Corporations

Fax Number : (850)617-6383

Promi

Addount Name : TAXBEAF.COM INC Addount Number : 125140000064 Phone : (365)541-3980 Fax Number : (765)717-1040

\*\*Enter the email address for this numbers entity to be used for future annual report mairings. Encor only the email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GALAPEOS LLC

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17867131940

From: TAXLEAF.COM CONTADORMAIMI.COM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 

112 1000054345 3

FILEL
2021 MAR - 9 PM 5: 30
MALLAHASSETT FLORIDA

GALAPEOS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number <u>L20000312078</u>	were filed on 10/02/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company." the designation "LLC" or t	the abbreviation "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 of registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·	iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Horida street address	
	. Florid	ii
	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

Page 1 of 3

17867131940

## 112 10000094348 3

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

Title	Name .	Address	Type of Action
AMBR	QUERE, ROMAIN	1549 NE 123RD ST	
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			□ Charge

From: TAXLEAF, COM CONTADORMAIMI, COM

1121000034043

ending any other information, e					دي <u>ن</u> مسد
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ective date, if other than the date in effective date is listed, the date must be so the: If the date inserted in this block of cument's effective date on the Depart	loes not meet the applicat	date of filing or mor the statutory filing	(optional) e than 90 days after filing, requirements, this date	) Pursuant to 605,0207 will not be listed as	7 (3)(b) : the
record specifies a delayed efi The 90th day after the record	ective date, but not is filed.	an effective tir	me, at 12:01 a.m.	on the earlier of	f:
nted DECEMBER 24TH	2020				
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Sign	nature of a member or author	ized representative o	f a member	<del></del>	
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