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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PRIME CORPORATE FILING SERVICES LLC

The first of the second second

Account Number : I20230000092 Phone : (786)356-1156 Fax Number : (305)564-6768

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

Email Address: NFO@PRIMETILING.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRAN CACAO EXPORT S.A. LLC

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K. Brumbley 8/7/23, 3:50 PM From Prime Corporate Filing 1.305.564.6768 Mon Aug 7 14:05:25 2023 MDT Page 2 of 4

## (4 23000273 969 3)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C (A Florida Lir	company as it now appears on our records.  mited Liability Company)	)
he Articles of Organization for this Limited Liability Com	pany were filed on 10/10/2020	and assigned
lorida document number L20000313108		· · ·
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	l liability company here:	
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	***	
Principal office address MUST BE A STREET ADDRES	SS)	
		_
nter new mailing address, if applicable:	345-54-54-54-54-54-54-54-54-54-54-54-54-5	
Aailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered of	fice address on our records, enter th	
ent and/or the new registered office address here:		AA 3 A T T T T T T T T T T T T T T T T T
N. CN. C. I.		AUG.
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

From Prime Corporate Filing 1.305.564.6768 Mon Aug 7 14:05:25 2023 MDT Page 3 of 4

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
AMBR	Maria Jose Rivas Lima	1818 SW 1st Ave Ste#2015	<b>=</b> Add
		Miami, FL 33129	□Remove
			□Change
			□Add
			□Remove
<del></del>			
			□Remove
			CChange
			āAdd
			□Remove
		10 to	□Change
			□Remove
			Change
			CAdd
			□Remove
			Change

From Prime Corporate Filing 1.305.564.6768 Mon Aug 7 14:05:25 2023 MDT Page 4 of 4 1123000273969 3) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated 08/07 Signature of a member or authorized representative of a member CARLOS R. SANCHEZ VELARDE / MARIA JOSE RIVAS LIMA