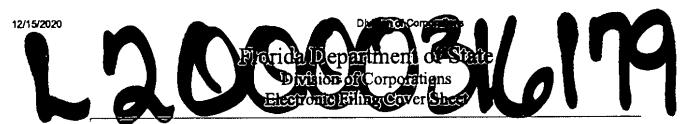
To: 18506176383 From: 19165767051 Date: 12/15/20 Time: 12:34 PM Page: 01/04



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.

(((H20000428579 3)))



H200004285793ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Fax Number	: (850)617-6383	•
From:			
	Account Name	; PARASEC	
	Account Number	: 120180000086	
	Phone	: (916)576-7000	
	Fax Number	1 1	
••Enter	the email address	s for this business entity to be used for ngs. Enter only one email address please.	futur

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN A BIG LEGACY LLC

MECEIVED

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

US 12/16/20

To: 18506176383 From: 19165767051 Date: 12/15/20 Time: 12:34 PM Rage 202/04

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A BIG LEGACY LLC (Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fil	ed on 10/06/2020 and assigned
Plorida document number L20000316179	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability cor	npany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	oany," the designation "LLC" or 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 office acregistered agent and/or the new registered office address here:	idress on our records, enter the name of th
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address
	, Florida
	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

'To: 18506176383 From: 19165767051 Date: 12/15/20 Time: 12:34 PM Page: 03/04

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	Peter Ojala Zarate	1083 N. Collier Blvd., #353	Add
		Marco Island, FL 34145	□ Remove
			⊠ Change
			Remove
			Remove Change
			Add
		-	Remove
			☐ Change
			Add
			□ Петвоче
			Change
			Add
			☐ Remove
			□ Chonge
			Remove
			C'hange

To: 18506176383 From: 19165767051 Date: 12/15/20 Time: 12:34 PM Page: 04/04 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) We're doing an amendment to add the middle name (optional) E. Effective date, if other than the date of filing: (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. 2020 December 14 Dated Signature of a member or authorized representative of a member Peter Zarate Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00