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COVER LETTER

Division of Corpo	rations						
SUBJECT:	& M Suns Name of Limi	et Bay L	LC				
The enclosed Articles of Ar	mendment and fee(s) are subr	nitted for filing.					
Please return all correspond	ence concerning this matter t	to the following:					
	tose Lucia	No Sande Manager of Person	iite				
	18M 5	Firm/Company	<u>C</u>				
	2800 NW 5	56th Ave #C1	04				
LauderHill /FLoRida / 33313 City/State and Zip Code							
	marioetch E-mail address: (to	DEVERRY & HOT NO be used for future annual report notif	Mail-CoM				
For further information cond	cerning this matter, please ca	II:					
Jose Wait	erson	iteat (786) 694 Area Code Daytime	0813 Telephone Number				
Enclosed is a check for the t	following amount:						
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				

Registration Section

TO:

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited</u> (A	Liability Compa Florida Limited	<u>iny as it now appéars on :</u> Liability Company)	our records.)	. •		
The Articles of Organization for this Limited Liab Florida document number $30/1252$		were filed on <u></u>	107/201	20and assigned		
This amendment is submitted to amend the follow	ing:					
A. If amending name, enter the new name of the						
The new name must be distinguishable and contain the wor	ds "Limited Liabi	_				
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2800 NW.		▼		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2800 NW 56th AVE # C104 LauderHILL IFL 33313				
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our recor	is, <u>enter the name</u>	of the new register		
Name of New Registered Agent:	tose	2 LUCIANO	SANde	Maite		
New Registered Office Address:	Name of New Registered Agent: JOSE LUCIANO SANDE Maite New Registered Office Address: 2800 NW 56th Ave # C104 FL, 33.31 Enter Florida street address					
	Laude	RHILL	, Florida	33343 Zip Code		
at the second of						

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 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.

Jose Wciano Sanc
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 Type of Action <u>Title</u> Name 1 MGR JOSE WCIANO SANDE MAÎTE . ____ DANDE _____ □Remove 2800 NW 56+h Ave LAUDERHILL Vichange MGR MARIO WIS ETCHEVERTY LINAMIS DANG □Remove 2800 HW 56th AVE LANDERHILL /FL XiChange ______ _ ____ ____ □Remove □Change _____ Change

tose wiano Sande
Typed or printed name of signee