To:

13053284774



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	To: Division of Corporations Fax Number : (850)617-6383						
	From: Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774				17 m 7 19	7912、101-7	
	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**</pre>						
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TORNILLOS LLC	
(Name of the Limited Lisbility Company as it new appears on our records.) (A Florids Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 10/28/2020 and assigned assigned and assigned assigned assigned assigned assigned and assigned	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
be new came must be distinguishable and contain the words "Limited Liebility Company," the designation "LLC" or the abbreviation "LLC."	
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS	
Enter now mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	••
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address bere:	
Name of New Registered Agent:	:
New Registered Office Address:	
City Lip 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 affice 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

13053284774

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

.

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MGR = Mänäger AMBR = Authorized Member

Title	Name	Address	Type of Action			
MOR	OSVALDO J RODRIGUEZ BYRNE	18975 COLLINS AVE UNIT 2103	975 COLLINS AVE. UNIT 2103			
		SUNNY ISLES BEACH, FL 33160				
			DChange			
MGR	OSWALDO J RODRIGUEZ BYRNE	18975 COLLINS AVE UNIT 2103	🗑 Add			
		SUNNY ISLES BEACH, FL 33160	🖸 Remove			
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## D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	(optionsf) filing or more than 90 days after filing.) Pursuant to 605
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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.

ord is filed. Dated	July C. 2022 Seal
	Signature of a member or authorited representative of a member Mound Arvesu, AR
-	Typed or printed same of signee

Filing Fee: \$25.00