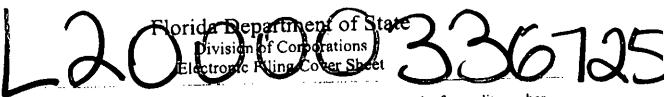
8/24/2021

Division of Corporations



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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 : (954)384-8565 : (954)385-5175 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIX CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

COVER LETTER

TO: Registration Se	ction porations		
PRIX CON	SULTING LLC		
SUBJECT:	Name of Lim	nited Liability Company	
	BJECT: Name of Limited Liability Company ce enclosed Articles of Amendment and fee(s) are submitted for filing. age return all correspondence concerning this matter to the following: DIEGO FIGUEROA Name of Person E & F LATIN GROUP, L.L.C. Firm/Company 1820 N CORPORATION LAKES BLVD STE 109 Address WESTON, FL 33331 City/State and Zip Code DIEGO@EFLATINACCOUNTING.COM Breat address: (to be used for future annual report notification) r further information concerning this matter, please call: FGO FIGUEROA Name of Person Legistration Section Registration Section Registration Section Registration Section Registration Section Registration Section Registration Section Division of Corporations Time of Corporations Street Address: Registration Section Division of Corporations		
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	DIEGO FIGUEROA		
		Name of Person	
	E & F LATIN GROUP, L	.L.C.	
		Firm/Company	
	1820 N CORPORATION	LAKES BLVD STE 109	
		Address	
	WESTON, FL 33331		
		•	
	DIEGO@EFLATINACCO	UNTING.COM (to be used for figure annual report notification)	
	oncerning this matter, piease o		
DIEGO FIGUEROA		ut (
Nume o	f Person	ALCO DE SENTINO CONTRACTOR DE SENTINO CONTRA	
Unclosed is a check for the	ne following amount:		
■ \$25,00 Filing Pcc	□ \$30.00 Filing Fee &	Certified Copy Certificate of Status & Certified Copy	
Registration	Section Corporations 27	Street Address: Registration Section Division of Corporations	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

PRIX CONSULTING LLC (Name of the Lim)	(A Florida Limited I	ny na it now appears un our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number L20000336725	iability Company	were filed on 01/02/2021	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new пате</u>		ility company here:		
The new name must be distinguishable and contain the	words "Limited Linhi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
		19790 W DIXIE HWY		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SUITE 308			
	ADDINOS	MIAMI FL 33180		
		19790 W DIXIE HWY		
Enter new malling address, if applicable:	: POY)	SUITE 308		
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI FL 33180		
3. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	ess nere:	address on our records, <u>enter the</u> GROUP, L.L.C.	name of the new regl	
	1820 N CORPO	DRATION LAKES BLVD STE 109		
New Registered Office Address:	Enter Florida street address			
	WESTON	, Flori	da 33326	
		Cin	Zip Cuile	

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 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	Name	Address	Type of Action	
		BUCHTER, FABIANA	□Add	
-		10700 W DIVIE HWY SUITE 308	□Remove	
		MIAMI FL 33180	■ Change	
		SZLAIEN, BRANDON		
		10700 W DIVIE HWY SHITE 108	□Remove	
		MIAMI FL 33180	Chunge	
			□Remove	
			Change	
			□Add	
			□Remove	
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Tective dute, if other than the on effective dute is listed, the date must ote: If the date inserted in this blooms	the specific and cannot be project does not meet the app	ior to date of filing of ne licuble statutory filing	requirements, this	date will not be lis	ited #
ocument's effective date on the De	partment of State's recor	ds.			
					 .
record specifies a delayed effective	date, but not an effective	; time, at 12:01 a.m. o	n the carlier of: (b)	The 90th day are	ier inc
is filed.					
	2021				
, JUNE 24		_ ·			
ated JUNE 24					
ated JUNE 24	Heal Tallera	thorized representative			

Filing Fee: \$25.00