120 000 355 387

I

	(Requestor's Name)
	(Address)
·	(Address)
	(City/State/Zip/Phone #)
PICK-L	
	(Business Entity Name)
	(,,,,
	(Document Number)
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Spacial Instruction	ns to Filing Officer:
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	(COVER LETTER	
TO: Registration So Division of Cor		۰. ۲	• • •
Rootanica		* -	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Desiree Esser		
	······	Name of Person	
	Rootanica LLC		
		Firm/Company	
	10005 NW 215t St		
		Address	
	Miami, FL. 33172		
		City/State and Zip Code	
	desiree_esser@yahoo.com		<u></u>
		to be used for future annual report notifica	nion)
For further information c	oncerning this matter, please c	all:	
Desiree Esser		786 417-05-85	
Name o	if Person	Area Code Daytime T	elephone Number
Enclosed is a cluck for t	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	х . .	Street Address:	
Registration	Section	Registration Secti	
Division of C P.O. Box 632		Division of Corpo The Centre of Tal	
Tallahassee,		2415 N. Monroe S	

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2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rootanica LLC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited I.	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>120000355387</u> .	were filed on 11/09/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," 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)	
	<u> </u>

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 here:

Name of Nam Registerial Augent		2021
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sweet address	<u> </u>
	Flo	rida 🔡 🕺
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>	5

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

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

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	Maxstock	10005 NW 21th Street, Miami, FL 33178	🖸 Add
			□Change
MGR Max	Maxstock LLC	10005 NW 21st Street Miami, FL 33178	= Add
			🗌 Remove
			Change
			🗆 Add
			🗍 Remove
			🗆 Change
			🗆 🖂 Add
			🗇 Change
			🗆 Add
			🗆 Remove
			DChange
			□ Add
			🗆 Remove
			🗆 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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-		
	1/26/2021	
E. Effect	tive date, if other than the date of filing:	
(lt`an et	ffective 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 605.02	207 (3)(b)
<u>Note:</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	as the
docun	nent's effective date on the Department of State's records.	
1044	d and d is a defined effective data. Notice the effective of $(2,0)$ is using the problem $(0,2)$. The O0th day off or the	•
record is fi	rd 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	ic
record is n	ncu.	
Dated	January 26th 2021	
Dated		

Signature of a member or authorized representative of a member

CONINTECH, LLC+ GONZALEZ, ELIESER A

Typed or printed name of signee

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