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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REMODELING SUERO & TRIANA LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	KEMODELING SU				
(Name of the Lin	nited Liability Comp (A Florida Limited	апу да it now аррея Liability Company)	m on our records.)		
The Articles of Organization for this Limited lorida document number L20000359269	Liability Company	y were filed on	11/12/2020	and assigned	
his amendment is submitted to amend the fo	llowing:				
a. If amending name, enter the new name	of the limited liab	oility company he	ere:		
N/A					
he new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the d	lesignstion "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		N/A			
Principal office address MUST BE A STREET ADDRESS		N/A			
		N/A			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	<del>-</del>		
		N/A			
		N/A		Ś	
				. 0	
3. If amending the registered agent and/or gent and/or the new registered office addr	registered office	address on our r	ecords, enter the nat	me of the new regist	
gent and/or the new registered office addr	ess nere:			n,	
Name of New Registered Agent:	N/A				
isalie of they Neglistered Agent.				97	
New Registered Office Address:	N/A			ပ္	
		Enter Florida street address			
	N/A		, Florida		
		City		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

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>	<u>Name</u>	Address	Type of Action
MGR	PABLO SUERO	7140 SW 10 ST	∃∧dd
		PEMBROKE PINES, FL 33023	□Rcmove
MGR PEDRO SUERO	PEDRO SUERO	7140 SW 10 ST	
	PEMBROKE PINES, FL 33023	■Removo	
			Change
<del></del>			□Add
		<del></del>	□Remove
			Change
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			Remove
			Change
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			□Remove
			DChange
		□Add	
			□Remove
			C Change

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		<del></del>
fective date, if other than the dinterment of the date in listed, the date imust be the listed in this block current's effective date on the Dept.	e specific and connot be prior to date of filing or more than 90 days after filing.	\$ D CDC 036
cord specifies a delayed effective of filed.	late, but not an effective time, at 12:01 a.m. on the earlier of: (b) Th	e 90th day after the
november 30	2020	
	*	
Eme		
Comp.	gnature of a member or authorized representative of a member	