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TO:

Registration Section
Division of Corporations

D&M WII SUBJECT:	RELESS LLC					
Name of Limited Liability Company						
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	ANDRES HURTADO					
		Name of Person				
	PRODEZK INC					
	·	Firm/Company				
	848 BRICKELL AVE ST	E 950				
Address						
	MIAMI, FL 33131					
		City/State and Zip Code				
	INFO@PRODEZK.COM					
		to be used for future annual report notif	ication)			
For further information	concerning this matter, please c	all:				
ANDRES HURTADO		+1 3052045646 at ()				
Name	of Person		Telephone Number			
Enclosed is a check for	the following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 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)			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Sec Division of Con The Centre of To	porations			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

D&W MIKETE22 LTC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company	, , ,	and assigned
Florida document number L20000381801		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		700 NOV
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		ξ ₀ .
		# <u>U</u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Fiduress.	Enter Florida street ad	dress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties provided for in Chapter 60	e, and I am familiar with and 05, F.S. Or, if this document is

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 a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR ———	JEFERSSON D FLOREZ VELANDIA	848 BRICKELL AVE	≡ Add
		STE 950	□Remove
		MIAMI, FL 33131	□Change
			□Remove
			□Add
	_		□Remove
			☐ Change
<u> </u>			□Add
			Change
			□Add
			□Remove
			□Change
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (If an effective 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 605.0207 (3) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Dated OCTOBER 20TH 2021 Signature of a member or authorized representative of a member YULY MARCELA OSPINA ARENAS, MGR

Typed or printed name of signee