	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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	To: Division of Corporations Fax Number : (\$50)617-6383 From:
	Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : I20000003145 Phone : (305)444-4994 Fax Number : (305)444-4977
	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:</pre>
	LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHILEKUN ILE, LLC
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18506176383	Page: 3 of 5	2021-03-01 15:34:49 GMT	13053284774	From: Yanet Avi			
	AR	ATICLES OF AMENDMENT TO TICLES OF ORGANIZATION OF	2021 HAR TALLAHAS	From: Yanet Avi			
	SHILEKUN ILE, LLC	A Florida Limited Liability Company)	records.)				
Florida doc	s of Organization for this Limited uncat number <u>L21000012199</u>	Liability Company were filed on 01/04/202	i and a	issigned			
1	ment is submitted to amend the fo						
		of the limited liability company here:					
The new name	must be distinguishable and contain th	e words "Limited Liability Company," the designati	on "LLC" or the abbreviation	1 L.C. 1			
Enter new	principal offices address, if app	licable:					
<u>(Principal o</u>	ffice address MUST BE A STR	<u>SET ADDRESS)</u>					
	mailing address, if applicable: dress MAY BE A POST OFFIC	<u>Е КОХ)</u>					
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B. If amend agent and/o	ling the registered agent and/o r the new registered office add		s, <u>enter the name of the</u>	new registered			
: <u>Na</u>	me of New Registered Agent:	CHANGE OF ADDRESS					
Net	New Registered Office Address:	3760 W FLAGLER ST Enter Florida street address					
		MIAMI	, Florida <u>33134</u>	:			
		City	7.10	Code			
New Register	ed Agent's Signature, if changin	g Registered Agent:					
provisions of accept the ol	f all statutes relative to the pr	pred agent and agree to act in this capa oper and complete performance of my e rgistered agent as provided for in Chap we registered office address. I hereby co is change.	ver 605 FS Or if this	document is			

If Changing Registered Agent, Signature of New Registered Agent

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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 Type of Action Address Title Name 3760 W FLAGLER ST AMBR YENIA LOPEZ ⊡Add MIAMI, FL 33134 ORemove **E**Change MGR JORGE L. FROMETA 3760 W FLAGLER ST ₿Add MIAMI, FL 33134 __ ORemove ___ DChange FILED DRamove DChange PM 5: $\frac{\omega}{N}$ Remove DAdd DRemove ----- OChange _ ⊡Add _____ 🛛 🖳 🗌 Remove __ ÜChange

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Effective date, if other the If an effective date is listed, the of <u>Note:</u> If the date inserted in document's effective date or	late must be specifi this block does r	c and cannot be prior tot meet the applic	able statutory fili	nore than 90 days afte	lonal) r filing.) Porsuant to (is date will not be l	505.0207 (3Xb) isted as the
e record specifies a delayed o rd is filed.	iffective date, but	t not an offective ti	me, at 12:01 a.m	. on the earlier of: (b) The 90th day a	fter the
		2021				
Dated						