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	M JOEL GOMEZ LAMPREA,	LLC	•
UI;	Name of Lim	ited Liability Company	
losed Articles of	Amendment and fee(s) are sub	emitted for filing.	
eturn all correspo	ondence concerning this matter	to the following:	
	MALCOLM JOEL GOMEZ LAMPREA, LLC Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Malcolm J. Gomez		
	Address: Address: To the following amount: Fee \$\begin{array}{c} \$\text{S10.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\text{Street Address:} \$\text{Street Address:} \text{Address:} \$\text{Street Address:} \$Street Ad		
		Firm/Company	
	4532 W. Hiawatha Street		
		Address	
	Tampa, FL		
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ner information of		·	meason)
n J. Gomez		at ()	
Name o	of Person	Area Code Daytii	me Telephone Number
d is a check for t	he following amount:		
.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration Division of O P.O. Box 632	Section Corporations 27	Registration Solution of Co The Centre of	orporations Tallahassee
	Mailing Addre Registration Division of Co. MALCOLE Marcollosed Articles of the control of Co. Mailing Addre Registration Division of Co. P.O. Box 632	MALCOLM JOEL GOMEZ LAMPREA. Tampa, FL Magomezlamprea@gmail.co E-mail address: (ner information concerning this matter, please of the plane of Person Malcolm J. Gomez Tampa, FL Magomezlamprea@gmail.co E-mail address: (Name of Person Malcolm J. Gomez E-mail address: (Description of Corporations Malcolm J. Gomez Malcolm J. Gomez Malcolm J. Gomez E-mail address: (Description of Limitation of Limitations) Malcolm J. Gomez Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations) Malcolm J. Gomez E-mail address: (Description of Limitations)	MALCOLM JOEL GOMEZ LAMPREA, LLC Thank of Limited Liability Company Malcolm J. Gomez Name of Person Firm/Company 4532 W. Hiawatha Street Address Tampa, FL City/State and Zip Code m.gomezlamprea@gmail.com E-mail address: (to be used for future annual report noter information concerning this matter, please call: In J. Gomez. Name of Person Tampa FL City/State and Zip Code m.gomezlamprea@gmail.com E-mail address: (to be used for future annual report noter information concerning this matter, please call: In J. Gomez. Name of Person Tampa Fee S12-7/42 Area Code Dayti Mailing Fee S10.00 Filing Fee & Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Malcolm Joel Gomez Lamprea, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/14/2021 and assigned Florida document number $\frac{L21000031529}{L}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new refletered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 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>	<u>Address</u>	Type of Action
MGR	Malcolm J. Gomez	4532 W. Hiawatha Street	
		Tampa, FL 33164	□Remove
			Change
			□Add
			□Remove
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Signature	2 member of author	rized representative	of a member			

Filing Fee: \$25.00