L21000032451

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	Registration Se Division of Cor		*		
eun ire		ASSURANCE LLC			
SUBJEC	1;	Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	arm all correspo	ndence concerning this matter	to the following:		
		SAYLI SAAVEDRA			
	Name of Person				
	D NAKAMA FACTION CORP				
	Firm/Company				
		777 NW 72nd Ave Suite I	115		
			Address		
		MIAMI, FL 33126			
		CAVUICAAVEDDAGICU	City/State and Zip Code		
		SAYLISAAVEDRA@ICL	to be used for future annual report notification)		
For furthe	er information c	oncerning this matter, please c	all:		
SAYLI S	AAVEDRA		786 4208458 at ()		
	Name of	f Person	Area Code Daytime Telephone Number		
Enclosed	is a check for th	ne following amount:			
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, □ Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, □ Certificate of States & Certified Copy (additional copy is enclosed)		
]]]	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Comp	SUKANCE LLC	n our records.)	
\ <u>\</u>	(A Florida Limited	Liability Company)	· · · · · · · · · · · · · · · · · · ·	
The Articles of Organization for this Limited I	Liability Company	y were filed on $\frac{01/12}{1}$	<u>/2021 </u>	and assigned
Florida document number L21000032451				
This amendment is submitted to amend the fol-	lowing:			
A. If amending name, enter the new name	of the limited lial	bility company here	:	
(SAME)				
The new name must be distinguishable and contain the	words "Limited Liab	oility Company," the desig	gnation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if appli	(SAME)			
(Principal office address MUST BE A STRE			 _	
	ending name, enter the new name of the limited liability company here: Inne must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." We principal offices address, if applicable: In office address MUST BE A STREET ADDRESS) We mailing address, if applicable:			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	E BOX)			
		address on our reco	ords, <u>enter the name of t</u>	he new registered
agent and/or the new registered office additi	ess nere.			
Name of New Registered Agent:	Vor the new registered office address here:			
	777 NW 72 N	D AVE SUITE 1115		
New Registered Office Address:			street address	
	MIAMI		Florida 33126	GD
		City	, T.W.I.G.	Code
New Registered Agent's Signature, if changing	Registered Agent	<u>t:</u>	-	1 1
I hereby accept the appointment as register	ed agent and ag	ree to act in this cap	pacity. I further agree to	comply with the
provisions of all statutes relative to the pro-	per and complete	e performance of my	rduties, and I am famili	ar with and
accept the obligations of my position as reg being filed to merely reflect a change in the	registered offic	e address, I hereby	confirm that the limited	liability 18
company has been notified in writing of this	s change.		۳ .	န 2
			1 1	6
			Aught	
	If Cha	anging Registered Agent	, Signature of New Registere	d 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>	Name	Address	Type of Action
MGR	LISANDRA GARCIA	777 NW 72 ND AVE SUITE 1051 MIAMI, FL 33126	5 _ ≣ Add
			_ □Remove
			_ Change
MGR	VAZQUEZ, CHRISTOPHER	EZ, CHRISTOPHER 9729 SW 138 AVEMIAMI, FL 33186	_ □Add
			_ = Remove
			_ Change
			_ □Add
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ffectiv	ve date, if other than the date of filing: (optional).	
an effe	ctive 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 605.0	207 (
<u>sote:</u> l locume	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed int's effective date on the Department of State's records.	has t
)
record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 Alay after	he
d is file	·	
Dated	03/30/2021	
_	<u> </u>	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	1. 1 Care	
	Typed or printed name of signec	

Filing Fee: \$25.00