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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CONTADORMIAMI.COM INC

Account Number: 100200000130 Phone: 109540245-7888 Fax Number: 107860713-1940

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREENCSS LLC

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To: 18506176383

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

17867131940

GREENCSS LLC (Name of the Limited Lightity Co	negation is not appears up the re-	cords i				
(A Florida Limit	ed Liability Company)	<u>coens.</u>				
The Articles of Organization for this Limited Liability Company were filed on 02/04/2021 Florida document number 1.21000038025			and assigned			
his amendment is submitted to amend the following:						
. If amending name, <u>enter the new name of the limited l</u>	iability company here:					
		7.	. 2			
he new name must be distinguishable and contain the words "Limited L	lability Company," the designation?	"I.I C" or the abbreytari	տո 1. <u>1.2.</u> "			
nter new principal offices address, if applicable:	3847 NE 168TH ST APT					
Principal office address MUST BE A STREET ADDRESS	NORTH MIAMI BEACH	. FL 33160 💮	<u> </u>			
Tincipal affice address bio31 BE A STREET ADDRESS			 w	;		
		***	=	:		
The state of the state of	3847 NE 168TH ST APT	3C E.	; ; , ,	į		
nter new mailing address, if applicable:	NORTH MIAMI BEACH	I. FL 33160 💆				
Mailing address MAY BE A POST OFFICE BOX				_		
3. If amending the registered agent and/or registered officent and/or the new registered office address here: Name of New Registered Agent: ITZEP, JU		nter the name of t	ne new regi	<u>ster</u>		
•	COTH CT A DT AC	<u> </u>				
New Registered Office Address: 3847 NE F	3847 NE 168TH ST APT 3C Finer Florida street address					
S. C. T. S. C.	······································					
NORTH M	HAMI BEACH	Florida <u>33160</u> 	Code			
	City	Σή	C TAGE			

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.

Judith Stzep 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

To: 18506176383

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ARBOLEDA, DIEGO ALEJANDRO	3847 NE 168TH ST APT 3C	□Add
	· · · · · · · · · · · · · · · · · · ·	NORTH MIAMI BEACH, FL 33160	□Remove
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record specifies a delayed effective Lis filed.	e date, but not a	n effective tir	ne, at 12:01 :	a.m. on the ear	tieroti (b) T	he 90th day i	itter the	
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	Signature of a mo	C		tative of a mem	net .		•	