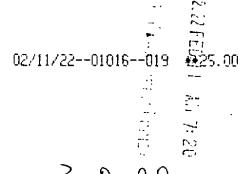
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	GROUP ENTERPRISES LLC		
SUBJECT:	Name of Lim	ited Liability Company	··········
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	OSWALDO GUERRA		
	Name of Person 3 REINAS GROUP ENTERPRISES LLC Firm/Company 14074 SW 166TH ST Address MIAMI,FLORIDA 33177 City/State and Zip Code 3reinasgroupenterpriseslle@gmail.com E-mail address: (to be used for future annual report notification) rther information concerning this matter, please call:		
	3 REINAS GROUP ENTE	RPRISES LLC	
		Firm/Company	
	14074 SW 166TH ST		
		Address	"
	MIAMEFLORIDA 33177		
		City/State and Zip Code	
	- · · · · · · · · · · · · · · · · · · ·		Tar and the same
			incation)
For further information c	oncerning this matter, please ca	all:	
OSWALDO GUERRA		305 7757795 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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		<u>Street Address:</u> Registration Se	ection
Registration S Division of C		Division of Co	
P.O. Box 632	•	The Centre of	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L (A l	iability Company as it now appears lorida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liabiliforida document number L21000040142	lity Company were filed on JA?	NUARY 20,2021 and assigned		
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company he	<u>re</u> :		
he new name must be distinguishable and contain the words	"Limited Liability Company," the de	esignation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable	e:			
Principal office address MUST BE A STREET A	(DDRESS)			
	<u></u>			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	<u></u>			
3. If amending the registered agent and/or regingent and/or the new registered office address h	stered office address on our re ere:	ecords, <u>enter the name of the new regist</u>		
Name of New Registered Agent:	OSWALDO GUERRA			
New Registered Office Address:	14074 SW 166TH ST			
	Enter Florida street address			
		33177		
2	MIAMI	, Florida 33177 Zip Code		

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.

3 REINAS GROUP ENTERPRISES LLC

If Changing Registered Agent, Signatur 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the date of filing:		_ (optional)
effective date is listed, the date must be specific and cannot be prior to date of tee. If the date inserted in this block does not meet the applicable stat	filling or more than 90 d	ays after filing.) Pursuant to 605.0
tument's effective date on the Department of State's records.	atory ming requireme	ms. ms care on not of notes
cord specifies a delayed effective date, but not an effective time, at 1.	2:01 a.m. on the earlic	er of: (b) The 90th day after t
s filed.		
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11 1 14		
Signature of a member of authorized rep	resentative of a member	-