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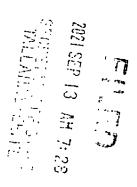
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Co	rporations		
	ARE NETWORK LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Max Salas		
		Name of Person	
	Migrative Inc		
		Firm/Company	
	8850 Nw 36th St Unit 233	6	
		Address	
	Doral, FL 33178		
		City/State and Zip Code	
	info@migrative.us		
		to be used for future annual report notificati	
For further information	concerning this matter, please c	all:	2021 * EC TA
Max Salas		305 7142124 at ()	SE
Name	of Person		ephone Number 13
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Concertificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration	Section	Street Address: Registration Section	
Division of 0	Corporations	Division of Corpora	ations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PERVOLARE NETWORK LLC			
(Name of the Lim	ited Liability Com (A Florida Limited	pany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited	Liability Compan	ny were filed on 02/02/2021	and assigned
Florida document number L21000058487			
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Lial	bility Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:	C BAV	N/A	
Mailing address MAY BE A POST OFFICE	<u>: BUX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office addr		e address on our records, <u>enter the</u> i	name of the new regist
Name of New Registered Agent:	N/A		A3S.
New Registered Office Address:	N/A		<u>ω</u>
· · · · · · · · · · · · · · · · · · ·		Enter Florida street address	Hall St.
		, Florida	
		City	i Zip Codig

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	TAS NETWORK S.A	Calle 53, Marbella, Ave. José De La Cruz Herrera,	□Add
		World Trade Center, ofi. 706, Ciudad de Panama	□Remove
		Republic of Panama Zip Code 07179	🗏 Change
MGR	TORRES RIVERA, OMAR E	Juan Leon Mera E4-451 y La Pinta	□Add
		Quito, Zip Code 170522	□Remove
		Ecuador	Change
			□ Adđ
			□Remove
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicat document's effective date on the Department of State's records.	date of filing or more ole statutory filing re	(option than 90 days after fil equirements, this d	ing.) Pursuant t	o 605.020 e listed a
	ne, at 12:01 a.m. on	the earlier of: (b)	The 90th day	after the
ne record specifies a delayed effective date, but not an effective time and is filed. Dated	Tome			

Filing Fee: \$25.00