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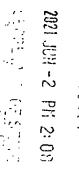
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Jan 21

## COVER LETTER

Registration Section

**Division of Corporations** 

TO:

SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ISAAC MORA		
		Name of Person	
	AROM EXPORTS & DRA	AIN WIZ ROOTER SERVICES LI	LC 38.1
		Firm/Company	
	2231 SW 44 TER		72 1
		Address	PH !
	FORT LAUDERDALE FI	. 33317	2021 JUN -2 PH 2: 08
ž.		City/State and Zip Code	<del></del>
	GISELA@YOUROASISIN	IC.COM	
ı	E-mail address: (	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
ISAAC MORA		754 235-3232 at ( )	
Name o	f Person		e 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ICES LLC			
any as it now appears on ( Liability Company)	our records.)		
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e address on our recor	ds, <u>enter the name</u>	e of the new regi	
Enter Florida s	treet address	<u>.</u>	
City	Florida	Zip Code	
	bility Company)  y were filed on 02/02/2  bility company here:  bility Company," the design  N/A  N/A  Enter Florida s	bility Company)  y were filed on 02/02/2021  bility company here:  bility Company," the designation "LLC" or the abb  N/A  N/A  Enter Florida street address  Florida	

## 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>	Address	Type of Action
MGR	ISAAC MORA	2231 SW 44 TER	<b>≣</b> Add
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			□Change
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active date if of	ther than the dat	to of filings			lantion	al\	
effective date is lis	ted, the date must be	specific and cannot	be prior to date of	filing or more than	option O days after fil	ling.) Pur	suant to 605.02
<u>e:</u> If the date ins ument's effective	erted in this block date on the Depar	does not meet the tment of State's r	e applicable statu ecords.	tory filing require	ements, this d	late will	not be listed:
cord specifies a d s filed.	elayed effective da	te, but not an effe	ective time, at 12	:01 a.m. on the ea	rlier of: (b)	The 90	th day after th
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