

121000058715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

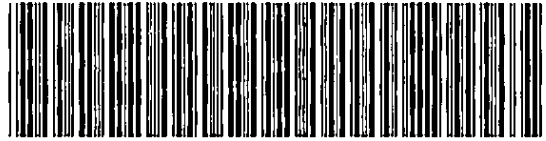
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HUNTD BUENOS AIRES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCELO E STRANO

Name of Person

HUNTD BUENOS AIRES LLC

Firm/Company

25 NE 5TH ST APT 202

Address

MIAMI, FL 33132

City/State and Zip Code

MARCELOSTRANO10@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCLO E STRANO

305 793-6736

at ()

Name of Person

Area Code

Daytime Telephone Number

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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>	<u>Address</u>	<u>Type of Action</u>
MGR	FACUNDO L CABRERA MARTINEZ	2016 BAY DR APT 304	☐ Add
		MIAMI BEACH, FL 33141	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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SECRETARY OF STATE
TOLAHUSSE, FL

FILED

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

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 date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 9TH 2022

Typed or printed name of signee _____

Filing Fee: \$25.00

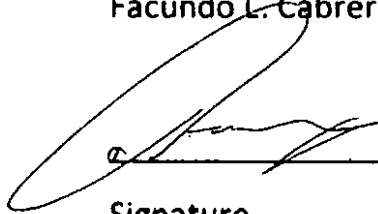
62 A
YA

Voluntary Withdraw Notice

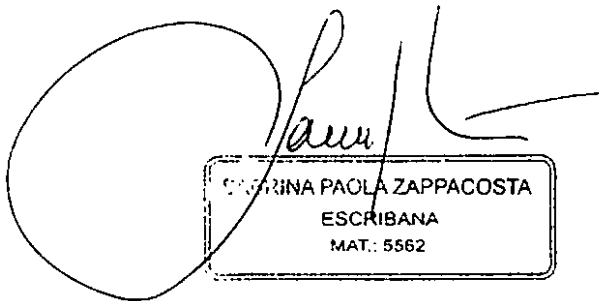
I Facundo L. Cabrera Martinez, voluntarily resign from my position as Manager and from being part of the company HUNTD BUENOS AIRES LLC created on 02/02/2021 and residing at 1 Alhambra Plaza Ph Floor Miami, FL 33134. Leaving my partner Marcelo E Strano as the sole owner of HUNTD BUENOS AIRES LLC. If you have any questions or need additional information, do not hesitate to contact me at 54 9 11 6559-8641.

Sincerely,

Facundo L. Cabrera Martinez


Signature

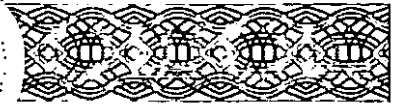
FIRMA/\$ CERTIFICADA/\$ a FOJAS
F003892955 BS. AS. 05/09/2022


CAROLINA PAOLA ZAPPACOSTA
ESCRIBANA
MAT.: 5562



ACTA DE CERTIFICACION DE FIRMAS

LEY 404



A ZAPPACOSTA
BANA
5562

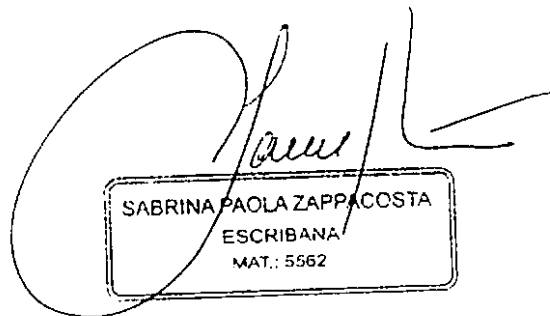
ANEXO

F 003892955



1 Buenos Aires, 05 de Septiembre de 2022 En mi carácter de escribano
2 Titular del Registro 2141 de Capital Federal. ---
3 CERTIFICO: Que la/s Firma que obra/n en el
4 documento que adjunto a esta foja, cuyo requerimiento de certificación se
5 formaliza simultáneamente por ACTA número 067.-- del LIBRO
6 número 61.--, es/son puesta/s en mi presencia por la/s persona/s
7 cuyo/s nombre/s, documento/s de identidad y justificación de identidad se indican
8 en los términos del artículo 306, inciso a) del Código Civil y Comercial de la Nación, con el
9 documento que me fue exhibido y que a continuación se menciona: **CABRERA MARTINEZ,**
10 **Facundo Luis, DNI: 34.123.523-** datos que surgen del documento de identidad que tuve a
11 la vista – quien manifiesta actuar por sí. Se certifica: **Voluntary Withdraw Notice. Se deja**
12 **constancia que el documento no es de autoría de la escribana autorizante y que el**
13 **mismo está redactado en un idioma que no es de su conocimiento. No consta lugar ni**
14 **fecha. Anexo numero F003892955 corresponde a F018100727 CONSTE.**

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SABRINA PAOLA ZAPPACOSTA
ESCRIBANA
MAT.: 5562