8/25/22, 11:45 AM

Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA CATALANA LLC

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA CATALANA LLC		_			
(Name of the Limite	d Liability Compar A Florida Limited L	ny as it now appears o liability Company)	n our records.)		
The Articles of Organization for this Limited Liz Florida document numberL21000067988	ability Company			and assigned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here	ı		
The new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the desig	gnation "LLC" or the ab	obreviation "L.L.C."	
Enter new principal offices address, if applicable:		801 US Highway 1			
(Principal office address MUST BE A STREET ADDRESS)		North Palm Beach, FL 33408			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		801 US Highway 1			
		North Palm Beach, FL 33408			
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	s here:	address on our reco		ne of the new registered	
New Registered Office Address:	801 US Highway 1			F 25	
	North Paln	n Beach	i street address Florida	33408	
Nan Desistaned Agent's Signature if changing R	enictored Aponts	City		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.

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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	MARIA I BARRERA ALVAREZ	801 US Highway 1	□Add
		North Palm Beach, FL 33408	□ Remove
			ØChange
MGR	ANGELICA B BARRERA ALVAREZ	801 US Highway 1	□Add
		North Palm Beach, FL 33408	Remove
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			🗀 Add
			Remove
			Change
			🗆 Add
			🗆 Remove
			Change

14154847068

Jenisa Irizarry

Filing Fee: \$25.00

Typed or printed name of signce