12/2/21 10 07 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 : (844)386-0178 Fax Number : (214)317-4754

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

RW911	Address:	

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ADTICLES OF AMENDMENT

ARTICLES O	F AMENDMENT	(((H21000440292 3)))	
. Pariet Be of	TO	₽	
ARTICLES OF	ORGANIZATION	2021 Séc	
	OF	ARE ARE	
COTOJO LLC		1021 DEC -2 PH	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)	[
			٠
The Articles of Organization for this Limited Liability Compa	ny were filed on 02/11/2021	——— अपुर्के संघारत्	
Florida document number 121000071839		⊅ ′ 0	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BON)			
·			
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, i	enter the name of the new register	ed
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street	address	
		, Florida	
	City	Zip Code	

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

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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

(((H21000440292 3)))

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EUGENI, CONSTANZA	5040 NW 7TH ST STE 705	
		MIAMI, FL 33126	
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			□ Add
			□Remove
			□Change
			Remove
			□ Change
			□Add
		<u></u>	□Remove
			□ Change
			□Add
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		 	□ Change
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			□Remove
		(([]Change (H21000440292 3)))

				(((H210004402	92 3)))
D. If an	sending any other information	n, enter change(s) here:	(Attach additional sheets,	if necessary.)	
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	ment's effective date on the Depar		the statetory thing requiremen	na, una date will not be na	ica as the
If the record is	ord specifies a delayed effective da filed.	te, but not an effective tim	e, at 12:01 a.m. on the earlier	ÄL	
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Date	1 NOVEMBER 29		<u>-</u> ·	ASSE	
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	Sign	nature of a member or author	fixed representative of a member		PH 12: 39
	TOMAS LAUREIRO			ORIO,	ω ω
	· 	Typed or printed	name of signee	<u>``</u>	9

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