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SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

COCO PRO SUBJECT:	OPERTIES I, LLC				
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	NIDIA FLOREZ GIGLIOI	LI.			
		Name of Person			
	 .	Firm/Company	 -		
	5340 CARAMELLA DR				
		Address			
	ORLANDO. FL 32829			2022 OCT 13 SECRETARN TALLAHA	25.2m
	hmaof@yahoo.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report notifica	ntion)		
For further information c	oncerning this matter, please ca	all:		AM 9: 42 OF STATE SSEE, FL	الوسدة"
hmaof@yahoo.com	_	407 334-1616			
Name o	f Person	Area Code Daytime T	elephone 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)	Certified	te of Status &	ı
Mailing Address Registration	Section	Street Address: Registration Secti			
Division of C P.O. Box 632	•	Division of Corpo The Centre of Tal			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02/16/2021}{1}$ and assigned Florida document number L21000078595 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

New Registered Agent's Signature, if changing Registered Agent:

COCO PROPERTIES I LLC

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.

City

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
MGR Lucas Quimbayo Londono	Lucas Quimbayo Londono	5340 CARAMELLA DR	≣ Add
		Orlando, FL, 32829	□Remove
			Change
MGR Nidia Florez Giglioli	Nidia Florez Giglioli	5340 CARAMELLA DR	= Add
		Orlando, FL, 32829	□Remove
			□Change
MGR Mauricio Fe	Mauricio Fernandez Florez	5340 CARAMELLA DR	
		Orlando, FL, 32829	20 Emove SECRETALLA
MGR	Mateo Quimbayo Florez	5340 CARAMELLA DR	Change Change
		Orlando, FL, 32829	TAH €
			Change
		□Add	
			□Remove
			Change
		□Add	
			□ Remove
			□ Change

J. 11 amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	CRE CALL
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E. Effecti	ve date, if other than the date of filing: (optional)
Note:	ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
If the record	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated_	10/06/2021
	Signature of a member or authorized representative of a member
	Nidia Florez Giglioli

Typed or printed name of signee