## L21000085H20

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
(only only in the in)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(South of the state of the stat
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OSTONIONE PRATIONE TALLAHASSEE, FLORIDA

2021 OCT 15 AM 8: 25

## **COVER LETTER**

Division of Corp	OI #110H3			
7262 NW 11	3 PL LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sul	omitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	SILVANA BENEDETTI			
		Name of Person		_
	7262 NW 113 PL LLC			
		Firm/Company		•
	701 BRICKELL KEY BL	VD 1703		
		Address		•
	MIAMI, FL 33131			
		City/State and Zip Code		
	INFO@JCBSOLUTIONSI	NC.NET to be used for future annual repo	ort notification)	
For further information cor	ncerning this matter, please o	·	,	
SILVANA BENEDETTI	5	786 208-9	622	
Name of I	Person	at( )	Daytime Telephone Number	<del></del>
			oujume receptione realizer	
Enclosed is a check for the	following amount:			
<b>S</b> 225.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified	e of Status &
Mailing Address:		Street Addr	<b>e</b> zz:	

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

TO:

Registration Section

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT 15 AH 7: 22

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records: Liability Company)	ANASSEE, St.
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000085420</u>	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	r 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)		
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		daZip Code

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

7262 NW 113 PL 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.

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

Title	Name	<u>Address</u>	Type of Action
MGR	BONUKA HOLDING LIMITED	ROAD TOWN	🗀 Add
		TORTOLA, BV 99999 BV	🖼 Remove
			□Change
MGRM	SILVANA BENEDETTI	701 BRICKELL KEY BLVD 1703	
		MIAMI, FL 33133	□Remove
			☐ Change
		<del></del>	□Add
			Remove
			Change
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reffec <u>te:</u> [	e date, if other than the date of filing:
cord s file	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
∞d_	Octuber 14th 2021
	Signature of a member or authorized representative of a member