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COVER LETTER

TO:

Registration Section

Division of Co	orporations	•	
	ADORA LOS MOLLES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
		•	
	MONICA USCATEGUI		
		Name of Person	
	IMPORTADORA LOS MOLLES LLC Name of Limited Liability Company et enclosed Articles of Amendment and fee(s) are submitted for filing. asser return all correspondence concerning this matter to the following: MONICA USCATEGUI Name of Person GREENLIGHT FINANCIAL LLC Firmt/Company 7480 BIRD RD SUITE 810 Address MIAMI, FL 33155 City/State and Zip Code MUSCATEGUI@GREENLIGHTFINANCIAL.NET E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: ONICA USCATEGUI Name of Person At (Area Code) Daytime Telephone Number		
	7480 BIRD RD SUITE 81	0	
		Address	
	MIAMI, FL 33155		
		City/State and Zip Code	
	=		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
MONICA USCATEGU	וו		
Name	of Person		Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration Division of P.O. Box 63	Section Corporations 27	Registration Sec Division of Corp The Centre of To 2415 N. Monroe	porations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF** 2021 DEC 10 AH 11: 40

IMPORTADORA LOS MOLLES LLC

If Changing Registered Agent, Signature of New Registered Agent

(Name of the Limited Liability Company as it now appears on dur records) S.F. FL (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 03/02/2021	and assigned
Florida document number L21000101328		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 a	ddress on our records, <u>enter the</u>	name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	. Florid	la
	City , Florid	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I rovided for in Chapter 605, F.S.	am familiar with and . Or, if this document is

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

١,

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JOSE L. LIBERONA MUNOZ	1845 NW 112TH AVENUE, 203	□Add
		MIAMI, FL 33172	■Remove
			☐Change
			□Add
		·	□Remove
			□Change
			Remove
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