7/3/22, 11:01

Mar 07, 2022 11:05 (UTC-03)

Division of Corporations

Florida Department of State Division of Corporations Electronic Ethnic Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PETER MATHISON LLC

Account Number : I20210000152 Phone : (305)520-9343

Fax Number : (786)705-2040

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

Email	Address:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TABIT LLC

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COVER LETTER

From: +17867052040 (TU CONTADOR EN MIAMI)

TO:	Registration Sec Division of Corp		·	·
) CUT	TA	BIT LLC	
SUBJI	:C1:	Name of Limit	ted Liability Company	
The en	closed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspor	idence concerning this matter t	o the following:	
		F	ERNANDO VILLARREAL	
			Name of Person	
		1	PETER MATHISON LLC	
			Firm/Company	
		800	SE 4TH AVENUE, SUITE 139	
			Address	
		HAL	LANDALE BEACH, FL 33009	
			City/State and Zip Code	
			TUCONTADORENMIAMI.CO	
		E-mail address: (I	o be used for future annual report no	tification)
For fu	rther information co	oncerning this matter, please or	ıll:	
	FERNANDO V	/ILLARREAL	305 at ()	520-9343
	Name of	Person	Area Code Dayti	me Telephone Number
Enclo	sed is a check for th	ne following amount:		
≣ \$3	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section forporations 7	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassec, F	orporations Tallahassee oe Street, Suite 810

Mar 07, 2022 11:05 (UTC-03)

ARTICLES OF AMENDMENT **TO** ARTICLES OF ORGANIZATION OF

(Name of the Limited Lia (A Flo	TABIT LLC ability Company as it now appears brida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document number		03/08/2021	and assigned
This amendment is submitted to amend the following	ā:		
A. If amending name, enter the new name of the	limited liability company her	r <u>e</u> :	
The new name must be distinguishable and contain the words. Enter new principal offices address, if applicables (Principal office address MUST BE A STREET AL		signation "LLC" or the	abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2		AND AN 9
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on our re re:	ecords, enter the na	me of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	ida street address	
_	City		Zıp Code
New Registered Agent's Signature, if changing Regis	tered 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 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>	Name	Address	Type of Action
AMBR	CARRERA DIAZ, VANESSA E	15283 SW 28TH TERRACE	
		MIAMI, FL 33185	= Remove
			Change
AMBR	TORRES, ANA G	15283 SW 28TH TERRACE	= Add
		MIAMI, FL 33185	□Remove
			Change
			□Add
			∐Remove
			[]Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			(]Add
			□Remove
			☐ Change

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From:	+17867052040 (TU CONTADOR EN	MIAMI)
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. II amenun	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: If th	date, if other than the date of filing:	05.0207 (3) sted as the
the record sp cord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	ter the
Dated	FEBRUARY, 25TH 2021	
	Vonessa Carrera	
	Signature of a member or authorized representative of a member	
	CARRERA DIAZ, VANESSA E Typed or printed name of signee	

Filing Fee: \$25.00