### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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Email	Address:			

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROXIMO LAW, PLLC

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2021 JUL 27 PM 4: 46 SELVEL AND SEE, FLOORE. Taylor Seay 8004323622

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OXIMO LAW, F lability Company lorida Limited Lia	As it now appears on our recordility Company)	ds.)
he Articles of Organization for this Limited Liabil	lity Company w	ere filed on <u>03/10/2021</u>	and assigned
lorida document number 1.21000115725	·		
his amendment is submitted to amend the following	ng:		
. If amending name, enter the new name of the	- limited liabilit	ty company here:	
Caldera Law PLLC		T TYPE TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE T	
he new name must be distinguishable and contain the words	"Limited Liability	Company," the designation "LLC	C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable	<b>2:</b>	1428 West Avenue, Apt. 40	21
(Principal office address MUST BE A STREET ADDRESS)		Miami Beach, FL 33139	10.
			27
			P
nter new mailing address, if applicable:		1428 West Avenue, Apt. 4	بَبَ ــــــــــــــــــــــــــــــــــ
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u>xo</u> .	Miami Beach, FL 33139	
	-		
s. If amending the registered agent and/or registered affice address he		dress on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:	1428 West Avenue Ant 406		
New Registered Office Address:			
		Enter Florida street addre	5.5
_	Miami Beach		lorida 33139
_	<u> </u>	City	Zip Code

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.

/s/ Benjamin Wolkov	
If Changing Registered Agent, Signature of New Registered Agent	_

1121000207222

#### Taylor Seay 8004323622

## 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	Benjamin Wolkov	1428 West Avenue, Apt. 406.	
		Miami Beach, FL 33139	□Remove
			□Add
			□ Remove
			Change 2
		<del></del>	□ Change 21 JUL 27
			Remove ¬ பா
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SECRETARY OF STATE
SECRETARY OF STATE

). If amer	ding any other informati	on, enter change(s) here: (Attach additional sheets, if no	ecessary.)
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			27 PH 3: 11
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(If an offer <u>Note:</u> I		e specific and cannot be prior to date of filing or more than 90 days af k does not meet the applicable statutory filing requirements, t	
the record		date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated_	July 26th	,	
	<u></u>	/s/ Benjamin Wolkov gnature of a member or authorized representative of a member	
		BenjamWolkov	
		Typed or printed name of signee	<del></del>

Filing Fee: \$25.00