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07/26/21 11:12:15

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

SOLUM GROUP, LLC.

(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 03/15/2021 and assigned Florida document number L21000123123.

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:

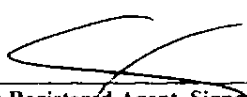
Name of New Registered Agent: CLARA MARTINEZ, ESQ.

New Registered Office Address: 2423 SW 147TH AVENUE SUITE 332
Enter Florida street address

MIAMI, **Florida** FLORIDA
City *Zip Code*

New Registered Agent's Signature, if changing Registered 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 Changing Registered Agent, Signature of New Registered Agent

U

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>	<u>Address</u>	<u>Type of Action</u>
MGR	CESAR A. OMANA ALCALA	19600 SW 136TH ST.	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33196	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GERARDO ARQUERO	9411 SW 112 STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RANCHO SABOR LATINO CORP	19650 SW 136TH STREET	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33196	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JORGE L. MIRABAL	11800 SW 190 STREET	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33177	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	SHARE INVESTMENT GROUP, I	9411 SW 112 STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	JORGE L. MIRABAL	11800 SW 190 STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33177	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

01

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>	<u>Address</u>	<u>Type of Action</u>
MBR	PDC NEW BUSINESS LLC.	11800 SW 190 STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33177	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	IEO CALL SERVICES INC.	17801 NW 82ND AVE	<input checked="" type="checkbox"/> Add
		HIALEAH, FLORIDA 33015	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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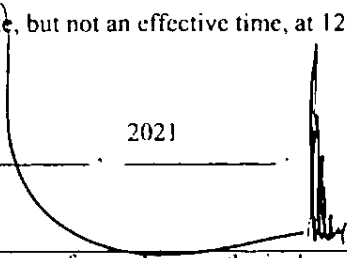
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____

_____ 2021 _____


Signature of a member or authorized representative of a member

GERARDO ARQUERO

 Typed or printed name of signee