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COVER LETTER

TO:

TO: Registrat Division						
SUBJECT: YO	ANNE I	RAMIREZ				
SOBJECT.		Name of Lim	ited Liability Company			
The enclosed Artic	Name of Limited Liability Company seed Articles of Amendment and fee(s) are submitted for filing. Image: Second Articles of Amendment and fee(s) are submitted for filing. YOANNE RAMIREZ. Name of Person YOANNE RAMIREZ, LLC FirmyCompany 7490 SW 152ND AVENUE APT.11 Address MIAMI, FL 33193 CityState and Zip Code YOANNERAMIREZ@YAHOO.COM E-mail address: (to be used for future annual report notification) Finformation concerning this matter, please call: NE RAMIREZ Name of Person Area Code Daytime Telephone Number s a check for the following amount: 10 Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed) Street Address: Certificat Copy (additional copy is enclosed) Lailing Address: Cegistration Section					
Please return all co	orrespond	dence concerning this matter	to the following:			
		Υ	OANNE RAMIREZ			
			Name of Person			
			YOANNE RAMIREZ, LI	LC		
			Firm/Company			
		749	0 SW 152ND AVENUE	APT.11		
			Address			
			MIAMI, FL 33193			
			· ·			
		E-mail address: (to be used for future annual repo.	rt notification)		
For further informa	ation cor	neerning this matter, please ca	all:			
			at ()			
ì	Name of I	Person	Area Code D	Paytime Telephone Number		
Enclosed is a check	k for the	following amount:				
XI \$25.00 Filing	. Fee		Certified Copy	Certificate of Status & Certified Copy		
		ection				
Division of Corporations						
		-	The Centre	of Tallahassee		
Tallahas	see, FI	_ 32314	2415 N. Me	onroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	any <u>as it now appear</u> Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	y were filed on	03/31/2021	and assigned
Florida document number L21000151065			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company ho	ere:	
	<u> </u>		200
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the d	lesignation "LLC" or the abb	oreviation**L.L.C.;**
Enter new principal offices address, if applicable:			12
(Principal office address MUST BE A STREET ADDRESS)			
			- <u></u>
			72:
Enter new mailing address, if applicable:			्र ज
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our r	ecords, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:		_	
	Enter Flor	cida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of provided for in (my duties, and I am fo Chapter 605, F.S. Or,	imiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

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	YOANNE RAMIREZ	7490 SW 152ND AVENUE APT.11 MIAMI,FL 33193	% Add
			□Remove
			□Change
AMBR	YOANNE RAMIREZ	7490 SW 152ND AVENUE APT.11 MIAMI,FL 33193	XIAdd
			Change
			□Rémove
			Change
			🗆 Add
			□Remove
			□Change
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			Change
	-		□Add
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		, <u></u>	□Change

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Filing Fee: \$25.00