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2022 APR 15 AM II: II SEURELARY OF STAR

COVER LETTER

TO: Registration Division of C			
CATARI SUBJECT:	NA DESIGN LLC		·
3003201.	Name of Lin	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	pondence concerning this matter	r to the following:	
	ENELISE MICHAELS		
	<u>-</u>	Name of Person	
	CATARINA ENGINEER	ING LLC	
		Firm/Company	
	6330 NA	Address AVE #	¥271
	_ FORT LAW	DERDALE, FL 3	3309
		City/State and Zip Code	
	E-mail address:	DERDALE, FL 3 City/State and Zip Code Say Cataring ev (to be used for future annual report not)	igineering, com
For further information	concerning this matter, please c		,
ENELISE MICHAELS		561 929-0876	
Name	of Person	at () Area Code Daytim	ne Telephone Number
Englaced is a about face	sh., 6-11		
Enclosed is a check for the		_	
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u>		Street Address:	
Registration		Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	•
Tallahassee,	FL 32314		e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY	2022 APR 15	
[[유 5]]	AH II:	

CATARINA DESIGN LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/06/2021	and assigned
Florida document number L21000160157		und uniqued
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
CATARINA ENGINEERING LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6330 N ANDREWS AVE #271	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33309)
Enter new mailing address, if applicable:	6330 N ANDREWS AVE #271	
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33309)
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗀 Add
			□Remove
			□Add
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ffective date, if other than t an effective date is listed, the date n ote: If the date inserted in this ocument's effective date on the	nust be specific and cannot be price block does not meet the appli	icable statutory filmo te	(optional) than 90 days after filing.) Pu equirements, this date wil	rsuant to 605.020 I not be listed a
ecord specifies a delayed effec is filed.	tive date, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90	th day after the
March 24th	a elsSignature of a member or auth			
Etfich	aels			

Filing Fee: \$25.00