Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : 120130000076 Phone : (305)388-7028 Fax Number : (305)479-2705

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PORCELUX LLC

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2021 SEP 15 PH 3: 43

1021 SEP 15 PM 4: 22

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Corporate Filing Menu

Help

PORCELUX LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Cor (A Florida Limit	mpany 25 it now appears on our record ted Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Comparing the Florida document number L21000182264	and assigned	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:		SEP 15
The new name must be distinguishable and cootain the words "Limited L	iability Company," the designation "LLC	" or the abbreviation "L L.C."
Enter new principal offices address, if applicable:	2921 NW 79th Ave	5- To
(Principal office address MUST BE A STREET ADDRESS	Doral, FL 33122	
Enter new mailing address, if applicable:	2921 NW 79th Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Doral, FL 33122	
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ice address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent: n/a		
New Registered Office Address:	Enter Florida street addres	<u> </u>
	City.	orida

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.

2021-03-15 15:04 CDT - +13054792705 PAGE 9/22

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	Ariel C. Lasca	2921 NW 79th Ave	\
		Doral, FL 33122	□ Remove
			D Change
MGR	Tim Suazo	7951 Riviera Blvd. Suite 101	
		Miramar, Fl 33023	■ Remove
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
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n effective date is listed, the date must te: If the date inserted in this bloom	be specific and cannot be prior to dat	te of filing or more than 90 days after	r filing.) Pursua	nt to 605.0 t he listed
cument's effective date on the Dep		· · · · · · · · · · · · · · · · · · ·		· ou notes
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cord specifies a delayed effective s filed.	date, out not an effective time,	re 12.94 a.M. On the callier Of. (7) 1 11 5 5 VIII 1	ma's effect
September 14th	2021			
red	MMM signature of a member or authorized			
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Filing Fee: \$25.00