9/15/21, 3:05 PM

Ribrida Department of State

Division of Corporations

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Yo:

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:___

LUC AMND/RESTATE/CORRECT OR M/MG RESIGN PORCELANICA GROUP LUC

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Corporate Filing Menu

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B2/16/2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PORCELANICA GROUP LLC		202 202				
(Name of the Limited Liability Compa (A Florida Limited I	onv as it now appears on our records.) Liability Company)	I SEP				
The Articles of Organization for this Limited Liability Company Florida document number L21000182272	were filed on 04/20/2021	and assigned				
This amendment is submitted to amend the following:		3:43				
A. If amending name, enter the new name of the limited liab	ility company here;					
The new usine must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	2301 NW 107th Ave Suite 110					
(Principal office address MUST BE A STREET ADDRESS)	Doral, FL 33172					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2301 NW 107th Ave Suite 110 Doral, FL 33172					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new registered				
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida street address					
	, Florid					
	Clty:	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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Roberto Lagares	2301 107th Ave. Suite 110	■Add
		Doral, FL 33172	□Remove
			Change
MGR	Tim Suazo	2301 107th Ave. Suite 110	□Add
		Doral, FL 33172	≣Remove
			□Change
			
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record spec is filed.	cifies a delayed effe	ctive date, but	not an effecti	ve time, at 12	2:01 a.m. on th	ne earlier of:	(b) The 90)th day afte	er the
	September	14th		<u> </u>					
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eated		Signature o	of a member or	authorized rep	resentative of a	member		_	

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