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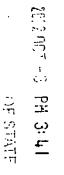
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A. RIVERS
DEC 2 1 2022



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COVER LETTER

TO:

Registration Section

Division of Corporations			
TUCANOS	SLLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
·	-	-	
	CRISTIAN R TORRES H	ENRIQUEZ	
		Name of Person	
	TUCANOS LLC		
		Firm/Company	 _
	55 OCEAN LANE DR #2	030	
		Address	
	KEY BISCAYNE, FL 331	49	
		City/State and Zip Code	
	CRISTIAN@CLICKMKT		
		to be used for future annual report no	otification)
For further information e	oncerning this matter, please c		
CRISTIAB R TORRES	HENRIQUEZ	954 937-5843 at ()	
Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$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)
Mailing Addres Registration S		Street Address: Registration S	Section
Division of Corporations		Division of Corporations	
P.O. Box 632 Tallahassee, 1		The Centre of	
rananassee, i	L 32314	24 (3 IV. IVIONI	roe Street, Suite 810

Tallahassee, FL 32303

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

TUCANOS 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 Florida document number <u>L21000187847</u>	Liability Company were filed on	04/22/2021	and assigned
This amendment is submitted to amend the following	llowing:		
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," th	ne designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Catanana and Canada an			
Enter new mailing address, if applicable: (Mailing address: MAY RE A ROST OFFICE			
(Mailing address MAY BE A POST OFFICE			
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:			ame of the new registered
New Registered Office Address:	55 OCEAN LANE DR		
	Enter F	Florida street address	30
	KEY BISCAYNE	, Florida	33149
New Registered Agent's Signature, if changing	City Registered Agent:	Florida street address , Florida is capacity. I further	Zip Côde ♀ ♀ ↓
I hereby accept the appointment as register provisions of all statutes relative to the propactions of my position as registential the obligations of my position as registential to merely reflect a change in the company has been notified in writing of this	per and complete performance eistered agent as provided for in registered office address, I hen s change.	of my duties, and Lar n Chapter 605, F.S. C	m faḥuliar with and Or, 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>	Name	Address	Type of Action
MRG	CRISTIAN R TORRES HENRIQUEZ	55 OCEAN LANE DR	□Add
		KEY BISCAYNE, FL 33149	□Remove
			□Add
			Remove
			☐ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			☐Change
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		 -	□Remove
			☐Change
			□Add
			□Remove
			□Сһапде

	N/A
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Effect	ve date, if other than the date of filing: (optional)
lf an eff Note:	ve date, if other than the date of filing:
	ent's effective date on the Department of State's records.
	d 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
rd is fil	ed.
rs 1	SEPTEMBER 9 2022
Dated	
	<u> </u>
	Signature of a member or authorized representative of a member
	CRISTIAN R TORRES HENRIQUEZ
	Typed or printed name of signee

. ...

Filing Fee: \$25.00