Division of Corporations Electronic Filing Cover Sheet

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

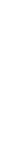
From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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 **BOFWANT LLC**



Certificate of Status Certified Copy Page Count 03 Estimated Charge \$25.00

JUN 0 8 2021

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ВС	DFWANT LLC	
(Name of the Limited Liabili (A Fiorid	ty Company as it now appears on our a Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability C	Company were filed on 05/03/2021	and assigned
Florida document number L21000206072	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADDR	(ESS)	77. 29
		21
Enter new mailing address, if applicable:		- SS - 1
(Mailing address MAY BE A POST OFFICE BOX)		MC D
		
		200 E
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>c</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Ertler Florida street d	didr ess
	City	, Florida
	City	up Coae

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 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
AMBR	CARLOS D TORRES CONDE	CALLE 10 CONJUNTO ONIX BARQUISIMETO,	□Add
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		LA 1080 VE	≅Remove
AMBR	DIEGO INAMOTO VIVAS	CALLE 10 CONTRICTO ONLY IN DOLVED 4ETO	□Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary);)			
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F. Effective date if other than the date of filing.			
E. Effective date, if other than the date of filing: (optional) (if an effective date is listed, the date must be specific and econor be print to date of filing or more than 90 days after filing.) Pursuant to 6 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lidecurrent's effective date on the Department of State's records.	i05.0207 (3); isted as the	b)	
If the record specifies a delayed effective date, but not an effective time, at 12:01 n.m. on the earlier of: (b) The 90th day af record is filed.	ter the		
Dated			
- In other Courts			
Signature of a member of authorized representative of a member			
ANDREA CASTRO			

Filing Fee: \$25.00

Typed or printed name of signee