

# L21000253910

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

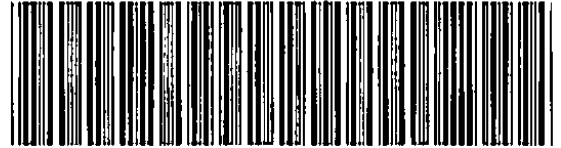
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 NOV 22 PM 1:04  
STATE  
TALLAHASSEE, FL

2/4/2023

AMERICAN LATEST TECHNOLOGY, LLC

SUBJECT: \_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN A DE FELIPE

\_\_\_\_\_  
Name of Person

AMERICAN LATEST TECHNOLOGY, LLC

\_\_\_\_\_  
Firm/Company

2233 44TH TER SW

\_\_\_\_\_  
Address

NAPLES, FL 34116

\_\_\_\_\_  
City/State and Zip Code

lucas@americanlatech.com

\_\_\_\_\_  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

JORGELINA BEMBHY

726 657 5701

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION  
OF

AMERICAN LATEST TECHNOLOGY LLC

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

FILE

The Articles of Organization for this Limited Liability Company were filed on 06/01/2021 and assigned  
Florida document number L21000253910.

2022 NOV 22 PM

SECRET  
TALLAHASSEE

This amendment is submitted to amend the following:

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," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

11200 Biscayne Blvd 448

(Principal office address MUST BE A STREET ADDRESS)

North Miami, FL 33181

Enter new mailing address, if applicable:

11200 Biscayne Blvd 448

(Mailing address MAY BE A POST OFFICE BOX)

North Miami, FL 33181

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
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 Changing Registered Agent, Signature of New Registered Agent

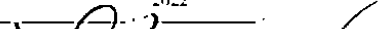
MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>       | <u>Address</u>          | <u>Type of Action</u>                      |
|--------------|-------------------|-------------------------|--------------------------------------------|
| PRESIDENT    | JORGELINA BEMBHY  | 11200 Biscayne Blvd 448 | <input checked="" type="checkbox"/> Add    |
|              |                   | North Miami, FL 33181   | <input type="checkbox"/> Remove            |
|              |                   |                         | <input type="checkbox"/> Change            |
| SECRETARY    | JIMENA F PERFETTO | 2233 44TH TERRACE SW    | <input type="checkbox"/> Add               |
|              |                   | NAPLES, FL 34116        | <input checked="" type="checkbox"/> Remove |
|              |                   |                         | <input type="checkbox"/> Change            |
| VP/AMB       | KEVIN DE FELIPE   | 11200 Biscayne Blvd 448 | <input type="checkbox"/> Add               |
|              |                   | North Miami, FL 33181   | <input type="checkbox"/> Remove            |
|              |                   |                         | <input checked="" type="checkbox"/> Change |
| MGR/AN       | MARCELO PERRONE   | 11200 Biscayne Blvd 448 | <input type="checkbox"/> Add               |
|              |                   | North Miami, FL 33181   | <input type="checkbox"/> Remove            |
|              |                   |                         | <input checked="" type="checkbox"/> Change |
|              |                   |                         | <input type="checkbox"/> Add               |
|              |                   |                         | <input type="checkbox"/> Remove            |
|              |                   |                         | <input type="checkbox"/> Change            |
|              |                   |                         | <input type="checkbox"/> Add               |
|              |                   |                         | <input type="checkbox"/> Remove            |
|              |                   |                         | <input type="checkbox"/> Change            |

F. Effective date, if other than the date of filing: NOVEMBER 1 2022 (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) kb  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record 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 record is filed

Dated NOVEMBER 5 2022

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

JORGELINA BEMBHY  
\_\_\_\_\_  
Typed or printed name of signer

Filing Fee: \$25.00