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Fax Number : (850)617-6383

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **DESI & FRAN LLC**

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FRAN LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)			
he Articles of Organization for this Limited Liability Company	were filed on 06/10/2021	and assigned		
lorida document number L21000271322				
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liab	dlity company here:			
he new name must be distinguished and and a single by				
he new name must be distinguishable and contain the words "Limited Liabi		<u> Ω</u> Ω —		
inter new principal offices address, if applicable:	10887 NW 17TH ST STE 206			
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33172	20		
		ירו פר זיי		
		is in the control of		
nter new mailing address, if applicable:	10887 NW 17TH ST STE 206	D Signal		
Mailing address MAY BE A POST OFFICE BOX	MIAMI, FL 33172	- <del> </del>		
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	ne name of the new registe		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
<del></del>	City', Flor	ica		
	City.	Lip 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.

3052201440

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	Eliot Felipe Chahuan Abedrabbo	10887 NW 17TH ST STE 206	□Add
		MIAMI, FL 33172	
MGR	Cecifia G Arrieta Rivera	10887 NW 17TH ST STE 206	□Add
		MIAMI, FL 33172	CRemove
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