Filectionic Filing Cover Sheet forter Please print this page and uselffeed covered eet. Type the flat cuffit number (shown below) on the top and bottom of all pages of the document.

(((H21000275820 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

**Enter	the	email	address	for	this	busin	ess	entity	to	be	used	for	<u>future</u>
an	nual	repor	t mailin	gs.	Enter	only	one	email	add	res:	s ple	ase.	ော်တွေ

Email	Address	:					_
-------	---------	---	--	--	--	--	---

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORES ROJAS INTERNATIONAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help



3052201440

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FLORES ROJAS INT	ERNATIONAL LIC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company v Florida document number L21000282660	were filed on JUNE 17TH, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	Company "sha dari
Enter new principal offices address, if applicable:	Company, the designation "LLC" or the abbreviation "LLC."
(Principal office address MUST BE A STREET ADDRESS)	700 / N
· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office address here:	dress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code

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 cm 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

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	-
MGR	Dalmira Rojas Colmenares	- 	Type of Action
		10887 NW 17th St STE 206	——— Dadd
		MIAMI, FL 33172	
			———— □Remove
MGR	Tereco Elector		
	Teresa Flores Rojas	10887 NW 17th St STE 206	_
		MIAMI, FL 33172	UAdd
			— Change
MGR ———	Jose Enrique Flores Rojas	10887 NW 17th STE 206	·
		MIAMI, FL 33172	□ Add
		7,120112	□Remove
MGR	Marco Antonio Flores Rojas	10887 NW 17th STE 206	
		MIAMI, FL 33172	□ Add
		MANN, PL 351/2	□Remove
			Change
			□Add
			□Remove
			Change
			DAdd
			□Remove

Typed or printed name of signee