From: 3054241050 To: 8506176380 9/19/2023 1:51:54 PM p. 2 of 5

19/9/23, 14:42

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STRATEGIC LEGAL SOLUTIONS, LLC

Account Number : 120230000140 Phone : (305)722-7090 Fax Number : (305)424-1050

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_sabrina@smulevichlegal.com

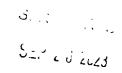
## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHEFFA INTERNACIONAL, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SHEFFA INTERNACIONAL, 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 Liability Company were filed on <u>07/01/2021</u> and assigned Florida document number <u>L21000304210</u> 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 Cin

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

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MGR = Manager

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = Authorized Member Title 1 <u>Name</u> <u>Address</u> Type of Action 2875 NE 191st Street O Add **MGR** Andrea Jordana Rosenblit Suite 801 \_■ Remove Aventura, FL 33180 □ Add \_\_ 🗖 Remove \_\_ 🖸 Add ☐ Remove □ Add Remove \_C Add ☐ Remove \_□ AdJ ☐ Remove

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	, cannot be prior to date of receipt or filed date and cannot l the Florida Department of State)	
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The effective date must be specific, the date this document is filed by t	the Florida Department of State)  19 2023	e inore than 90 days after