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CELLART USA (Name of the Limited I		tat us it naus annea		
(<u>Name of the Limited L</u> (A F	forida Lunited]	Luability Company)	<u>randour (reoras.</u>)	
The Articles of Organization for this Limited Liabil	ity Company	were filed on	07/26/2021	and assigned
Florida document numberL21000338497				
'his amendment is submitted to amend the followin	<i>ı</i> g:			
 If amending name, <u>enter the new name of the</u> 	<u>limited liab</u>	ility company h	ere:	
CELLARTUS LLC				
he new name must be distinguishable and contain the words	"Linsited Liabs	lity Company," the	designation "LLC" or t	he abbreviation "L.L.C."
inter new principal offices address, if applicable	::	857 NW 7TH STREET ROAD		
Principal office address MUST BE A STREET A	DDRESS)	MIAML FL 33	136	
		• = ·= · ·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		857 NW 7TH STREET ROAD		
		MIAMI, FL 33136		
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 If amending the registered agent and/or regist 	tered office a		ecords, <u>enter the</u>	name of the new registe
 If amending the registered agent and/or regist 	tered office a		ecords, <u>enter the</u>	name of the new registe
 If amending the registered agent and/or regist 	tered office a	address on our r	ecords, <u>enter the</u>	name of the new registe
8. If amending the registered agent and/or regist gent and/or the new registered office address he	tered office 2 <u>rre</u> :		ecords, <u>enter the </u>	name of the new registe
B. If amending the registered agent and/or regist gent and/or the new registered office address he <u>Name of New Registered Agent</u> :	tered office 2 <u>rre</u> :		ecords, <u>enter the r</u> nda siree address	name of the new registe
B. If amending the registered agent and/or regist gent and/or the new registered office address he <u>Name of New Registered Agent</u> :	tered office 2 <u>rre</u> :	Enter Flo.		
3. If amending the registered agent and/or regist gent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address:	tered office a are: N/A		rida sireei adariss	•
3. If amending the registered agent and/or regist gent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address:	tered office a are: N/A	Enter Flo.	rida sireei adariss	
B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered ag rovisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the registered	tered office : <u> SIA</u> <u> NIA</u> <u> tered Agent:</u> gent and agro nd complete ad agent as p stered office	Enter Fin City ee to act in this performance of provided for in (nda sireei oddress Florids capacity, 1 further 'my duties, and 1 a Thapter 605, F.S.	Zip Code agree to comply with a on familiar with and Or. if this document is
B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered ag hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registered	tered office : <u> SIA</u> <u> NIA</u> <u> tered Agent:</u> gent and agro nd complete ad agent as p stered office	Enter Fin City ee to act in this performance of provided for in (nda sireei oddress Florids capacity, 1 further 'my duties, and 1 a Thapter 605, F.S.	Zip Code agree to comply with on familiar with and Or. if this document is

If Changing Registered Agent, Signature of New Registered Agent >

To:

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 DbA 🗋 Remove _ 🖾 Change ___ ⊡.∧dd ٠. __ 🛛 Remove . _ 🗋 Change . •• __ 🖾 Change _ 🗆 Add _ 🗆 Remove _ 🗆 Change . _____ bbA@_____ . _ 🛛 Remove 👌 Change _ 🖾 Add ٠. Remove

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E. Effective date, if other than the date of filing: __________________________________(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 (ling.) Pursuant to 605 0207 (3)(b) <u>Note:</u> 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	JULY 27th	2023	
Dated	<u>_</u>		
		Contine C.	
		Signature of a member or authorized representative of a member	
		CAROLINA GUTTERREZ	
		Typed or printed name of signee	