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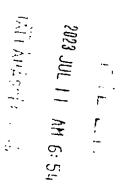
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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COVER LETTER

Division of Cor	porations	*		
DISTRIBUI SUBJECT:	IDORA MUNDO ELECTRO	NICA AA LLC		
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.		
	ndence concerning this matter	_		
	ANDRES E URBINA			
		Name of Person		
	DISTRIBUIDORA MUNI	DO ELECTRONICA AA LLO		
		Firm/Company		
	242 WHITE HERON WA	Υ		
		Address		
	ST CLOUD, FL 34772			
		City/State and Zip Code		
	andreseduardo.up@gmail.ed			
		to be used for future annual repo	rt notification)	
For further information ed	oncerning this matter, please c	all;		
ANDRES E URBINA		305 742 229	98	
Name of	Person	at () Area Code	aytime Telephone Number	
Enclosed is a check for th	e following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed	S60,00 Filing Fee Certificate of Sta Certified Copy (additional copy is ea	itus &
Mailing Address	<u>s:</u>	Street Addre	ss:	

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE

DISTRIBUIDORA MUNDO ELECTRONICA AA L	LC ²⁰²³ JUL 11
(Name of the Limited Liability Compa (A Florida Limited I	the company on our records.) Cability Company AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
The Articles of Organization for this Limited Liability Company	were filed on and assigned
Florida document number L21000338516	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.E.C."
Enter new principal offices address, if applicable:	2802 NW 72ND AVENUE
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33122
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2802 NW 72ND AVENUE MIAMI, FL 33122
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
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

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>	<u>Address</u>	Type of Action
			□Remove
			∃Change
		<u> </u>	
			DRemove
			□Change
			
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		⊐Change	
		¬Add	
	<u> </u>	ДКетюче	
		□Change	
		⊐Renюve	
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	JULY 1, 2023
Effect	ve date, if other than the date of filing:
Note.	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th
docum	ent's effective date on the Department of State's records.
1	
ne recor ord is fi	d 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 ed.
Dated	JULY 4 2023
	Simple
	Signature of a member or authorized representative of a member
	ANDRES E URBINA
	Typed or printed name of signee