

Florida Department of State Division of Corporations (shown below) on the top and bottom of all pages of the document.

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		To:		
			Division of Corporations	
			Fax Number : (850)617-6383	
		From:		
		40	Account Name : NATIONS BUSINESS CENTER, INC.	
-		된다. 위한	Account Number : I20000000238	
		필급위	Phone : (305)591-9448	
.i	$\ddot{\Xi}$	-1-:	Fax Number : (954)753-3447	
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	\subset	**Enter	the email address for this business entity to be used for future	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN APCA, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APCA, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 08/12/2021	and assigned
Florida document number L21000362615		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(Principal office address MUST BE A STREET ADDRESS)		024
		40 Q
		20 45 55
Enter new mulling address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
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 i	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.

Il 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>	Address	Type of Action
MGR	MARIA JOSE PANIZO ARANA	5551 N UNIVERSITY DR SUITÉ 103	∄ Add
		CORAL SPRINGS FL 33067	□Remove
			□ Change
. MGR	ALFONSO PANIZO ARANA	5551 N UNIVERSITY DR SUITE 103	⋑ Add
		CORAL SPRINGS FL 33067	□Remove
MGR	MATHIAS PANIZO ARANA	5551 N UNIVERSITY OR SUITE 103	2024 AUG
		CORAL SPRINGS FL 33067	20 AH 10: 4
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the record spec cord is filed.	fies a delayed e	ffective date, but n	iot an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the	:
Dated	7/26/	2024	<u> </u>	. •			
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