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COVER LETTER

TO:	Registration Se Division of Cor			\$
SUBJEC		EMICALS LLC.		•
3003120		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		ELIO J. REYES TOUSEN	T	
			Name of Person	
		ORCA CHEMICALS LLC		
			Firm/Company	-
		5955 NW 105 CT, STE 21	3	
			Address	
		DORAL, FL 33178		
			City/State and Zip Code	
		ELIOJRT@GMAIL.COM		
			to be used for future annual report noti	fication)
For furth	er information co	oncerning this matter, please co	all:	
JEAN MARCO RAMIREZ		786 587-8310 at ()		
	Name o	f Person		e Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ S25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Sec	ction

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

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORCA CHEMICALS LLC.			
(Name of the Limite	ed Liability Compa (A Florida Limited	ny as it now appears on our records. Liability Company)	.)
The Articles of Organization for this Limited Lia	ability Company	were filed on AUGUST 16, 2021	and assigned
This amendment is submitted to amend the follo			
A. If amending name, enter the new name of	the limited liab	ility company here:	
NOT APPLICABLE			
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	NOT APPLICABLE	
Principal office address MUST BE A STREET	T ADDRESS)		
Enter new mailing address, if applicable:		NOT APPLICABLE	
Mailing address MAY BE A POST OFFICE E	8 <i>0X)</i>		
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	egistered office : s here: NOT APPLICA		
New Registered Office Address:			DD23 NOV
 	7	Enter Florida street address	rida 19
		, F101 , F101	rida 3
New Registered Agent's Signature, if changing R	<u>.eg</u> istered Agent:		SI CO
thereby accept the appointment as registered provisions of all statutes relative to the propericcept the obligations of my position as registieng filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of the properior when the properior with the company has been notified in writing of the properior with the pr	r and complete tered agent as p egistered office	performance of my duties, and provided for in Chapter 605, F	l I am familiar with and S. Or, if this document i

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 a or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JEAN MARCO RAMIREZ	5955 NW 105 CT, STE 213, DORAL , FL 33178	= Add
			□Remove
			□Change
		 	□Add
			□Remove
			□Change
			🗆 Add
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Effective date, if other than (If an effective date is listed, the da Note: If the date inserted in t document's effective date on	nis block does not me	et the applicabl	date of filing or more to e statutory filing re-	(option han 90 days after til quirements, this d	al) ing.) Pursuant to 605.0; ate will not be listed
he record specifies a delayed ef ord is filed.	fective date, but not a	n effective time	, at 12:01 a.m. on tl	ne earlier of: (b)	The 90th day after t
Dated NOVEMBER 8th		2021	7 <i>6</i> _		
	Signature of a me	ember or authoriz	ed representative of a	nymber	
ELIA I DEVEGA		The second secon			
ELIO J.REYES T.		yped or printed i	mma of cionas	 -	