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A. BUTLER FEB - 4 2022

COVER LETTER

		stration Sec ion of Corp			
arb inc		ESCALA PI	ROPEŖTY LLC		
SUBJEC	JT: _		Name of Lim	nited Liability Company	
The encle	osed .	Articles of A	amendment and fee(s) are sub	omitted for filing.	
Please re	turn :	ill correspor	idence concerning this matter	to the following:	
			NELSON A. RODRIGUE	Z-VARELA, ESQ.	
				Name of Person	
			NELSON A. RODRIGUE	Z-VARELA, P.A.	
			-	Firm/Company	
			1190 S. LEJEUNE ROAD)	
			· · · · · · · · · · · · · · · · · · ·	Address	
			MIAMI, FL 33134		
				City/State and Zip Code	
For furth	ier inf	formation co	E-mail address: ((to be used for future annual report notification)	
			Z-VARELA	305 666-1330	
	••	Name of	Person	Area Code Daytime Telephone Number	
Enclosed	d is a	check for th	e following amount:		
■ \$25.	.00 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is or	itus &
	Reg	ing Address istration S		Street Address: Registration Section Division of Corporations	
	P.O	. Box 632 ahassee, F	7	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESCALA PROPERTY LLC		LULL CT.	1
(Name of the Limited Liab (A Flori	ility Company as it now appears or ida Limited Liability Company)	our records.)	···_
The Articles of Organization for this Limited Liability Florida document number L21000402879	Company were filed on 09/08/	2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the desig	nation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_	
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register agent and/or the new registered office address here		rds, <u>enter the</u> l	name of the new registe
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
		, Florida	ı <u></u>
	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 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>	Name	<u>Address</u>	Type of Action
MGR	Aldo Gaetano Bove Ticas	c/o Ramon Y. Garcia	■Add
		2929 SW 3rd Avenue, Suite 310	Remove
		Miami, FL 33129	□Change
Member	EFREN CORP.	c/o Ramon Y. Garcia	
		2929 SW 3rd Avenue, Suite 310	
		Miami, FL 33129	□Change
			□ Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			
			Remove
			M.C.

If amending any other informa				
	 -		-	
		<u> </u>		
				
		<u> </u>		
			 -	
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-		 		· <u>-</u>
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				_
Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	lock does not meet the app	dicable statutory filing	ore than 90 days after fig requirements, this	nal) filing.) Pursuant to 605.0207 (date will not be listed as t
e record specifies a delayed effectived is filed.	∕e date, but not an effectiv	e time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
Dated	2022			
Dated	•	·		
	7			<u> </u>
	Signature of a member or a	uthorized representative	of a member	
Aldo Gaetano Bove Ti	ras			
		rinted name of signee		<u> </u>

Filing Fee: \$25.00