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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : 128130000076 Phone

: (305)388-7028

Fak Number

: (305)479-2705

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAHMANE SUN LLC

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Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAHMANE SUN LLC		10 m
(Name of the Limited Liability Comp (A Florida Limited	any as It now appears on our record Liability Company)	17 28 OF COLUMN
The Articles of Organization for this Limited Liability Company	and asset of	
Florida document number L21000457584		A lo:
This amendment is submitted to amend the following:		1 *
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	n/a	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	r√a	
(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 bere:	address on our records, enter	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	53
	T71	nula.
	City	orida
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>	
I hereby accept the appointment as registered agent and agr	ree to act in this capacity. I fit	rther agree to comply with the

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	Address	Type of Action
AMBR	CRAFT ARQUITECTOS, S.A. DE	7951 RIVIERA BLVD, 101	
		MIRAMAR, FL 33023	€Remove
			Change
MGR	Bodegon AG	Wollerauerstrasse 21, 8834	≣ Add
		Schindellegi, Switzerland	Remove
		·····	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			🗀 Add
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effective date is listed, te: If the date inserte	d in this block do	es not me	et the applic	able statutor	ig or more tha y filing requ	o 90 days after irements, this	filing.) Pursu date will no	ent to 60. ot be lis	5.020 ted a
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