121000458915

(F	Requestor's Name)			
	Address)			
(/	Address)			
	City/State/Zip/Phone #)			
PICK-UP	WAIT ; MAIL			
(E	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

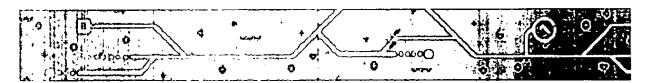
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zelbusiness

Oct 28, 2021

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassec, FL 32303

RE: BIOGREEN USA LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u> for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkcrest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you,

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIOGREEN USA LU		
(<u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number $\frac{1.21000458915}{1.000458915}$	Company were filed on 10/21/2021	and assigned
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the li</u>	imited liability company here:	
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Cartan and Cartan and James Street Brookley		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		·
B. If amending the registered agent and/or registe agent and/or the new registered office address her		e name of the new registe
Name of New Registered Agent:		17 y
Name of these registered agent.		775
New Registered Office Address:	Emer Florida street address	<u>.</u>
	Emer Frankli Arcer alan ess	• •
	, Flori	da El
	Cuy	zip Coae
New Registered Agent's Signature, if changing Registe	ered Agent:	1 ro

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

Title	Name	Address	Type of Action
MGR	Maria Fernanda l'alarico	966 Lavender Cir	■Add
		WESTON, FL 33327	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			🗀 Add
		47.11	□Remove
			□Change
		,	□Add
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			□Add
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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the De	the specific and cannot be prior to cook does not meet the applicable	date of filing or more than 90 da	
record specifies a delayed effective	date, but not an effective time	, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
l is filed.			
l is filed.	2021		
Lis filed. October 28	2021 Gue Leivas Signature of a member or authorize		

Filing Fee: \$25.00