Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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Email	lddress:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DONA ROSALPINA, LLC

	*
Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DONA ROSALPINA, LLC		
(Name of the Limited Liability Compan- (A Florida Limited Lia	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company w		and assigned
Florida document number L21000466680		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
	· ·	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered office adegent and/or the new registered office address here; 	iress on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:		SE ZE
New Registered Office Address:		SECTION ALLI SECTION
	Enter Florida street address	ILED 22 P 38EE
v	City , Florid	Rip Code
lew Renistered Agent's Signature, if changing Registered Agent:	•	RETAIL 3
		6 16. –1

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.

11/23/2021 15:19

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LAZARUS CORPORATE

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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	/P
MGR	Jose Eduardo Chavarria Melendez		Type of Action
 -			□Add
	,		Remove
Mon	1		□ Change
MGR	Frankin Antonio Chavarria Melendez		□Add
MGR	Haldy A. Change		□Change
	Heidy A. Chavarria		DAdd
			≅ Remove
			Change
MGR	Shaaron M. Campuzano		DAdd
			= Remove
			Change
	<u> </u>		□Add
			Remove
		<u> </u>	Change
:			DÀdd
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a ote: If the date inserted in this block does not meet the applicable statutory filing requirements, ocument's effective date on the Department of State's records.	ptional)	to 605,020 oe listed a
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of is filed.		y after the
ated 16th Movember 2021	SECTOR TALLAN	FILI
A , , , , , , , , , , , , , , , , , , ,	HASSE	FILED
$H \cup H $		1 1
Signature of a member or authorized representative of a member	<u> </u>	₹ [□]
Signature of a member of a member	CHE ST	D 1914 1: 389