Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000028824 3)))



H250000288243ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ELJAIEK,RUIZ,RODRIGUIZ,ALVEREZ,PLLC DBA ERRA LAW

Account Number: 120030000013 Phone: (305)444-5969 Fax Number: (786)532-9173

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

Email Address: MMC erra Qu. Com

ERRA TRUSTEES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

COVER LETTER

TO: Registration Section Division of Corporations							
ERRA TR	USTEES, LLC						
SORMEC1#	SUBJECTY Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all correspon	ndence concerning this matter	to the following:					
	Monique Martino						
		Name of Person	-				
	Eljaiek Ruiz Rodrig	uez & Alvarez PLLC	·				
	·	Firm/Company					
	2601 S Bayshore Di	rive 18th Floor					
	*************************************	Address					
	Coconut Grove, FL	33133					
	·	City/State and Zip Code					
	mm@ernlaw.com	छि be used for future annual report no	Manufact .				
For further information co	oncerning this matter, please o		incaron,				
Monique Martino		786-809-22	250				
Name of	f Person	at () 786-809-22 Area Code Daytin	ne Telephone Number				
Enclosed is a check for th	e following amount:						
□ \$25.00 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)				
Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of	rporations				
Tallahassee, F		2415 N. Monro	be Street, Suite 810				
		Tallahassee Fl	37403				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERRA TRUSTEES, LLC	
(Name of the Limited Liability Company as it now so (at Florida Limited Liability Content	O)
The Articles of Organization for this Limited Liability Company were filed .	11-01-2021 and assigned
on Florida document number <u>L21000471302</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited Hability company	hitre:
The new name must be distinguishable and contain the words "Limited Liability Company," to	he designation "LLC" or the abbreviation "L.C.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
· 	. 2
	925
	<u> </u>
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE EOSO.	20 T
Chaffing address MAT BE A POST GFFICE BOSO	r records, enter the name of the name of
B. If amending the registered agent and/or registered office address on ou	r records, enter the name of figures and 52
B. If amending the registered agent and/or registered office address on ou	
B. If amending the registered agent and/or registered office address on ou	
B. If amending the registered agent and/or registered office address on our specific and/or the new registered office address here: Name of New Registered Agent:	54
B. If amending the registered agent and/or registered office address on ou ment and/or the new registered office address here: Name of New Reposered 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 Changing Registered Agent, Stranbine of New Resistered Agent

If amending Authorized Person(s) authorized to manage, enter the life within a life with the person between the person of removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	CARLOS F. RODRIGUEZ		□Add
		,	<u></u> Ç iRemove
			□ Change
			□Add
		. 10	□ Remove
	<u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u> , □Add
		, 	□Remove
		<u>, ————————————————————————————————————</u>	□ Change
	<u> </u>		□ Add
		. 	Петоvе
		· <u>·····························</u>	C:Change
		, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	□Add
		:	□Remove
			Change
· 		·	□Add
		· 	□ Remove
			Change

H25000028824 3

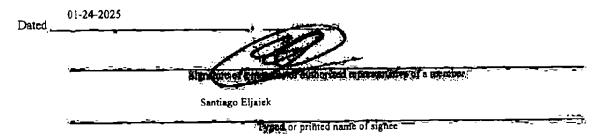
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filled.



H25000028824 3

Filing Fee: \$25.00