L21000374540

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H22000390108 3)))

H22000390108 3AEE

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)617-6380

From:
Account Name : US CONTADOR INC
Account Number : 120200000121
Phone : (770)928-2700
Fax Number : (888)772-8108

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

Email Address: _____

FILED
2022 NOV 15 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FL

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AGUMEFA LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	$25.00

2022 NOV 15 AM 3:56

Electronic Filing Menu Corporate Filing Menu Help

C. BRUMBLEY

NOV 17 2022

H22000390108 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGUMEFA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2022 NOV 15 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 11/02/2021 and assigned Florida document number L21000474540.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability 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)

13499 BISCAYNE BOULEVARD #610
NORTH MIAMI, FL 33181

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

13499 BISCAYNE BOULEVARD #610
NORTH MIAMI, FL 33181

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: CONTADOR RA LLC

New Registered Office Address: 4855 W HILLSBORO BLVD B3
Enter Florida street address

COCONUT CREEK, Florida 33073
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 Changing Registered Agent, Signature of New Registered Agent

H22000390108 3

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
AM	LOUSAME DE OKLANDER, BEATRIZ M	2937 S.W. 27 Avenue	☐Add
		Suite 107	■Remove
		Coconut Grove, FL 33133	☐Change
AMBR	OKLANDER, MARIANA P	13499 BISCAYNE BOULEVARD #610	■Add
		NORTH MIAMI, FL 33181	☐Remove
			☐Change
AMBR	PEREZ OKLANDER, FACUNDO	13499 BISCAYNE BOULEVARD #610	■Add
		NORTH MIAMI, FL 33181	☐Remove
			☐Change
AMBR	PEREZ OKLANDER, MELINA	13499 BISCAYNE BOULEVARD #610	■Add
		NORTH MIAMI, FL 33181	☐Remove
			☐Change
AMBR	PEREZ OKLANDER, AGUSTIN	13499 BISCAYNE BOULEVARD #610	■Add
		NORTH MIAMI, FL 33181	☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change

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

E. Effective date, if other than the date of filing: _____ (optional)

(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 filed.

Dated NOVEMBER 15TH 2022

Signature of a member or authorized representative of a member

MARIANA PATRICIA OKLANDER

Typed or printed name of signer