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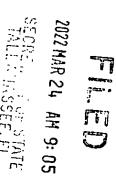
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cf 4/9/2022

COVER LETTER

TO: Registration So Division of Cor			
G	Name Change		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Mario W. Pino		
		Name of Person	
	Bayou Sueno Yuma, LLC		
		Firm/Company	
	9740 SW 3 Street		
		Address	
	Miami, FL 33174		
		City/State and Zip Code	
	mpino89@gmail.com	to be used for future annual report	natification
For further information of	concerning this matter, please c		ioniculon,
Mario W. Pino		786 262-6785	;
Name (of Person		rtime Telephone Number
Enclosed is a check for t	the 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)
Mailing Addre Registration		Street Address Registration	
Division of (Division of C	Corporations
P.O. Box 6327 The Centre of Tallahassee		of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 HAR 24 AM 9: 05

Cuban PS' Beach Cottage Getawa	y, LLC	om.
(Name of the Lin	nited Liability Company as it now app (A Florida Limited Liability Compan	pears on our records NEW TOP STATE NY TALLAMASSEE, FL
The Articles of Organization for this Limited	Liability Company were filed on	12/14/2021 and assigned
Florida document number L21000527050	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company	<u>v here</u> :
Bayou Sueno Yuma, LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," th	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl		
<u> Principal office address MUST BE A STRE</u>	<u>ET ADDRESS)</u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFIC	<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addr	ž.	ir records, enter the name of the new regist
Name of New Registered Agent:	Mario W. Pino	
New Registered Office Address:	9740 SW 3 Street	
Tien recuisioned Office reduces.		
ive w registered office riddress.	Enter i	Florida street address
1404 Registered Street Redices.	Enter i	Florida street address , Florida 33174

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

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>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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Note: If the date inserted in this	March 23, 202: March 23, 202: must be specific and cannot be prior to can block does not meet the applicable Department of State's records.	(optional late of filing or more than 90 days after	filing.) Pursuant to 605.0207 (3)(t
If the record specifies a delayed effer record is filed.	ctive date, but not an effective time	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated March 23	2022		
Dateu		•	
V () (

Filing Fee: \$25.00

Typed or printed name of signee