## L22000010948

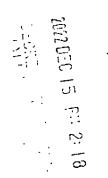
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## **COVER LETTER**

TO: Registration Se Division of Cor			,
SUBJECT: VILL	ARS IMPORT & EXPOR	T LLC	
SOBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	KARLYBETI	H CARDENAS CONTRERA	NS
	VILLARS IM	IPORT & EXPORT LLC	25
		Firm Company	220
	421 SW 20T	H ROAD	
		Address	
	MIAMI. FL .	33129	
		City/State and Zip Code	
		Z@GMAIL.COM to be used for future annual report noti	•
For further information c	roncerning this matter, please co	·	Heation)
KARLYBET	TH CARDENAS CONTRE	ERAS <sub>at (=</sub> 504 = <sub>1</sub> 3314-5350	6
	of Person		te Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Cor	
P.O. Box 632	27	The Centre of T	l'allahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	APORT & EXPORT LLC	·	
( <u>Name of the Limite</u>	d Liability Company as it now app A Florida Limited Liability Compan	ears on our records.)	
The Articles of Organization for this Limited Lic Florida document number <u>L22000010948</u> This amendment is submitted to amend the follow.  A. If amending name, enter the new name of	bility Company were filed on with the bility Company were filed on wing:	JANUARY 04, 2022	2 and assigned
The new name must be distinguishable and contain the we Enter new principal offices address, if applica (Principal office address MUST BE A STREET)	ble:	e designation "LLC" or the a	observation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	30X)		5 PH 2 18
B. If amending the registered agent and/or re agent and/or the new registered office addres		r records. enter the nan	ne of the new registered
Name of New Registered Agent:	KARLYBETH CARDI	ENAS CONTRERAS	_ <del></del>
New Registered Office Address:	421 SW 20TH ROAD		
isew registered virtue reduces.	Emer 1	Florida street address	
	MIAMI	, Florida	33129
	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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Repaired 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 = ManagerAMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
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Effective date, if other fan effective date is listed, ti	than the date of	f filing:	pe prior to date o	f filing or more th	optio	nal) filing ) Pursuant	10 605 O.	207
Note: If the date inserted document's effective date	I in this block doe	s not meet the	applicable sta					
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record specifies a delayed is filed.	ed effective date. t	out not an effec	ctive time, at 1	2:01 a.m. on th	e earlier of: (b)	The 90th day	y alter t	he
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Dated _30_Aq0	StO ZOZZ		or author ed re	presentative of a	_ member		_	