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To:

15612148442

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email	Address:	 	 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **CLANDESTINELLC**

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OCT 20 2022 K. Brumbley

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLANDESTINELLC					
(Name of the Limited Lin (A Flo	bility Compar orida Limited L	ny as it now appears on our records.) iability Company)			
The Articles of Organization for this Limited Liabilit	y Company	were filed on 01/10/2022	and assigned		
This amendment is submitted to amend the following	). 1.				
A. If amending name, enter the new name of the	<u>limited liabi</u>	lity company here:			
he new name must be distinguishable and contain the words	Limited Liabili	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		117 NE 54 St. Miami, FL 33137			
Miami, FL 33137					
B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:		ddress on our records, enter the na	me of the new registere		
New Registered Office Address:	7 NE 54 St.		32 T 7		
		Enter Florida street address			
M	iami	, Florida <sup>3</sup>	3137:		
		City	⊋ Zip Cαd <b>.</b>		
New Registered Agent's Signature, if changing Regis	tered Agent:		7		

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 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
MGR/ MBR	Boris Bianchi	117 NE 54 St.	□Add
		Miami, FL 33137	
			= Change
AMBR	Camila Posada	698 NE 1st Ave Apt 3909	□Add
		Miami, FL 33132	■Remove
			□Add
			□Remove
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			☐ Change
			□Remove
		<del></del>	Change
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			□ Change

15612148442

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ffective date, if other than an effective date is listed, the date inserted in this ocument's effective date on the	s block does not i	meet the applica	able statutory fili	(0) nore than 90 days a ng requirements,	otional) fter filing.) Pursuant to this date will not be	605.0207 listed as
	ctive date, but no	t an effective ti	me, at 12:01 a.m	on the earlier of:	(b) The 90th day	after the
I is filed.		2022	_··			
record specifies a delayed effer is filed.  Detailed October 19th		·	37			_
I is filed.		·		e of a member		-