

Florida Department of State
Division of Corporations
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L22000173875 19462

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ADRIAN TAX SERVICES INC.
Account Number : I20220000042
Phone : (786)370-2432
Fax Number : (305)266-5758

****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
CORSAN USA LLC**

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

2022 MAY 16 PM 1:23

FILED

2022 MAY 16 AM 8:18

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 17 2022

K. Brumbley

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CORSAN USA LLC

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

2022 MAY 16 AM 8:18

APPROVED
AND
FILED

The Articles of Organization for this Limited Liability Company were filed on 01/18/2022 and assigned
Florida document number L22000019462.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

5805 BLUE LAGOON DR, STE 300

MIAMI, FL 33126

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5805 BLUE LAGOON DR, STE 300

MIAMI, FL 33126

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:

N/A

New Registered Office Address:

5805 BLUE LAGOON DR, STE 300

Enter Florida street address

MIAMI

City

Florida

33126

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NOHEMI CORDON DE SANCHEZ	5805 BLUE LAGOON DR, STE 300	<input type="radio"/> Add
		MIAMI, FL 33126	<input type="radio"/> Remove
			<input checked="" type="radio"/> Change
MGR	ANNA C SANCHEZ CORDON	5805 BLUE LAGOON DR, STE 300	<input type="radio"/> Add
		MIAMI, FL 33126	<input type="radio"/> Remove
			<input checked="" type="radio"/> Change
			<input type="radio"/> Add
			<input type="radio"/> Remove
			<input type="radio"/> Change
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			<input type="radio"/> Change

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