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SECRETARY OF STATE
TAIL AMASSEE, FL

02/14/22--01033--019 **25.00

A. BUTLER FEB 2 8 2022

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	ROS	ARIO 4 LLC		
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person	<u>.</u>	 -
		Firm/Company		
	17350 STATE HWY 249	STE 220		
		Address		
	HOUSTON, TX 77064			
	EFILE1234@INCFILE.CO	City/State and Zip Code M	:	
	E-mail address: (to be used for future annual	l report notifies	ation)
For further information of	oncerning this matter, please co	all:		
LOVETTE DOBSON		1 88 at ()	38-462-3453	elephone Number
Name o	f Person	Area Code	Daytime T	elephone Number
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		Street A	address: ration Secti	On
Division of C	Corporations	Divisio	on of Corpo	orations
P.O. Box 632	27	The Ce	entre of Tal	lahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ROSARIO 4 LLC

(Name of the Limited Liability Company as it now appears on Bit feeded 4 AH 9: 49
(A Florida Limited Liability Company)

The Articles of Organization for this Limited I	Liability Company were filed or	n 01/04/2022 FEREYARY OF STATE and assigned
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability compan	<u>y here</u> :
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on o	ur records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	VANINA ESTHER ORDOR	ICA
New Registered Office Address:	1080 98TH ST, APT 7	
	Enter	Florida street address
	BAY HARBOR	, Florida 33154
	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

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
AMBR	VANINA ESTHER ORDORICA		
			□Remove
			\= Change
AMBR	DANIEL HORACIO ADDARIO		□Add
			□Remove
			□ Add
			□ Remove
			Change
			□ Add
			□Remove
			Change
			
			□ Remove
			□Change
			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing: (optional) If an effective date, it is taked, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. 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 rd is filed. Dated FEBRUARY, 8 2022 Waria Sagnature of a member or authorized representative of a member.		
Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	-	
Effective date, if other than the date of filing:	-	
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Dated FEBRUARY, 8 2022		
Vania Esther Ordonia		
Signature of a member or authorized representative of a member	Dated	FEBRUARY, 8 2022
Signature of a member or authorized representative of a member		Vania St. D. Varia
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