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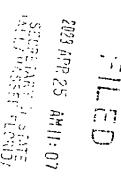
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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A. RIVERS JUN 1 0 2023

COVER LETTER

| TO: Registration So Division of Con | | | |
|--|---|--|--|
| SUBJECT: Jus | sto Commerce Name of Lin | LLC nited 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: | |
| | Adriana | Medina Name of Person | |
| | Justo | Commerce L Firm/Company | LC |
| | 10125 W | Sunrise Blub Ap | 4.103 |
| | Plantation | City/State and Zip Code Sce @ gmail. Cor to be used for brure annual report not | |
| | Justo Comme E-mail address: | to be used for bure annual report not | fication) |
| For further information c | oncerning this matter, please c | | |
| Adriana N Name o | ledina_ f Person | at (<u>786</u>) <u>515 –</u> Area Code Daytin | 3366 ne Telephone Number |
| Enclosed is a check for the | ne 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 Address: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

| Justo Commerce LLC | | |
|--|-------------------|--------------|
| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | | |
| | | |
| The Articles of Organization for this Limited Liability Company were filed on 01-18-22 | 🛌 and assigno | cd |
| Florida document number <u>L22 00034118</u> | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability company here: | | |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbre | eviation "L.l.,C. | *** |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| —————————————————————————————————————— | 2) 23 | |
| B. If amending the registered agent and/or registered office address on our records, enter the name of | C | gistered |
| agent and/or the new registered office address here: | 25 26 | 1 |
| Name of New Registered Agent: | AH | 1 1 1 1 |
| N | | |
| Enter Florida street address | 2311 | |
| | | |
| City | Zip Code | _ |
| New Registered Agent's Signature, if changing Registered Agent: | | |

N

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> | <u>Address</u> | Type of Action |
|--------------|-----------------|---|-------------------|
| MGR | Carlos A. Justo | 10125 W. Synrise Blud. | |
| | | Apt. 103 Plantation FL 3333 | <u>L}</u> □Remove |
| | | | □ Change |
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| Note: If t | date, if other than the date of filing: |
| If the record specord is filed. | secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| Dated | 04-17-2023. Uluara Medina |
| | Signature of a member of authorized representative of a member |
| | ADRIANA MEDINA Typed or printed name of signee |