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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

\*\*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 CLAVERSA INTERNATIONAL, LLC

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JUN - 8 2022

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## CLAVERSA INTERNATIONAL, 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 Li Florida document number L22000035694	ability Company w	vere filed on <u>02/01/20</u>	022	and assign	ed
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liabili	ity company here:			
The new name must be distinguishable and contain the w	onls "Limited Liabilit	y Company," the designation	"LLC" or the abbrev	viation "L.L.C	
Enter new principal offices address, if applica	able:	-			<del></del>
(Principal office address MUST BE A STREE	T ADDRESS)				
				*	
Enter new mailing address, if applicable:		<u> </u>			
(Mailing address MAY BE A POST OFFICE of	<u>BOX)</u>		<u>-</u>		<del></del>
B. If amending the registered agent and/or reagent and/or the new registered office address		ddress on our records, <u>c</u>	enter the name o	f the new re	gistered
	<b>.</b>	<b>A A</b>		2022	
Name of New Registered Agent:	Registered	Agents, Inc.			
New Registered Office Address:	7901 4th S	t N STE 300	<u> </u>	- 1	: په ري <del>ز ت</del>
		Enter Florida street (	address		
	St. Petersb	urg	_, Florida <u>337</u>	02 ==	
Nam Davistanad Assatta Chantons (faboration E	Danietarad Agante	City		: 51 ™ Coa⇔	
New Registered Agent's Signature, if changing F	vegiviereu Agent:			<b>∓</b> -	

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	DENIS LOPEZ	16186 SW 86 TER	□Add
		MIAMI, FL 33193	<b>∑</b> Remove
			□Change
AMBR	Ana Raquel Moncada Vindas	616 Tindal Ave	<b>X</b> 'Add
		Hamilton Township, NJ 08610	□Remove
			□Change
			🖸 Add
			□Remove
			Change
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			□Remove
			□Change
			□Add
		-1/3	□Remove
			□Change
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			□Remove
			[]Change

	ation, enter change(s) here: (Attach addition	
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	e date of filing:  Inst be specific and cannot be prior to date of filing or more block does not meet the applicable statutory filing Department of State's records.	(optional) e than 90 days after filing.) Pursuant to 605.0207 (3 requirements, this date will not be listed as th
he record specifies a delayed effect ord is filed.	ve date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
Dated 06/08	. 2022	
Riber Park		
	Signature of a member or authorized representative o	f a member

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