122000039641

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COVER LETTER

TO: Registration Section Division of Corporations

MIAMIDEPTO 01, LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yanina Miculitzki, Esq Name of Person Yanina Miculitzki, PA Firm Company 2999 N.E. 191 ST, Suite 403 Address Aventura, FL, 33180 City/State and Zip Code 6h:0!!.? C. t... yanina@miculitzkilaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Yanina Miculitzki 786 3615567 at Name of Person Area Code Davtime Telephone Number Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, S25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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 TO ARTICLES OF ORGANIZATION OF

MIAMIDEPTO 01, LLC

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(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 January 20, 2022 and assigned Florida document number 122000039641

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" of the abbreviation "LLC."

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 BON)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
	, 1	Florida Zip Code
	Ch	My Com

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

and the second second

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Member	AMANDULI, CORP	5151 Collins Avenue #229	Add
		Miami Baeach, FL 33140	
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e: If the date inserted in thi ument's effective date on th cord specifies a delayed effective.	ne Department of 2			on the earlier of: (b) The 90th day after

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. (3)(b) (the

June 15. Jated		
	Signature of a member or authorized/regresentative of a member	~
Leonardo Ruiz Diaz, F		
	Typed or printed name of signce	
		** ; ; ; ;
	Filing Fee: \$25.00	6 1 : J