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| Special Instructions to | Filing Officer: | |
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Office Use Only





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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

| SUBJECT: | Name of Lim | ited Liability Company | | |
|-------------------------------|--|---|--|-----------------------------|
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspo | ndence concerning this matter | to the following: | | |
| | JOSEPH F. CABANAS | | | |
| | | Name of Person | <u> </u> | |
| | CABANAS & ASSOCIA | TES, P.A. | | |
| | | Firm/Company | | |
| | 8350 NW 52ND TERRAC | TE - STE. #208 | | <u>,</u> , u |
| | | Address | | JIVÎSTOR : 22 AUG |
| | DORAL, FL. 33166 | | | 22 AUG 15 AM 8: 49 |
| | · | City/State and Zip Code | | Coase y |
| | maria@cabanaspa.com | | Caralian A | 6 6 6 6 6 6 6 6 6 6 |
| For further information c | n-mail address: (| to be used for future annual report noti: | ncation) | 64: |
| JOSEPH F. CABANAS | | 305 513 3639 | | |
| | f Person | at () | e Telephone Number | |
| Name o | rerson | Area Code Daytin | Perephone 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 Sta Certified Copy (additional copy is er | itus & |
| Mailing Addres Registration S | Section | Street Address: Registration Sec | | |
| Division of C | • | Division of Cor The Centre of T | • | |
| P.O. Box 632 | . / | The Centre of 1 | ananassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORNERSTONE GROUP MIAMI, LLC

| (Name of the Limited Lia (A Flo | ability Compan orida Limited L | iv as it now appears of iability Company) | n our records.) | | |
|--|---|---|--|--------------------------|------------------|
| The Articles of Organization for this Limited Liability Company were filed on February 3, 2022 | | nary 3, 2022 | and assigned | | |
| Florida document number L22000040367 | | | | | |
| This amendment is submitted to amend the following | g: | | | | |
| A. If amending name, enter the new name of the | limited_liabi | lity company here | : | | |
| N/A | | | | | |
| The new name must be distinguishable and contain the words | Limited Liabili | ty Company," the desig | gnation "LLC" or the abbre | viation "L.I | C." |
| Enter new principal offices address, if applicable: | : | N/A | | · - | |
| (Principal office address MUST BE A STREET ADDRESS) | | | | 22 | <u> </u> |
| | | | | AUG | <u> </u> |
| | | | | 15 | 974 |
| Enter new mailing address, if applicable: | | N/A | | >_ | 는 기 : 기 :: |
| (Mailing address MAY BE A POST OFFICE BOX | 2 | | | <u> </u> | |
| | _ | | | 543 | |
| B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent: | | ddress on our reco | ords, <u>enter the name o</u> | of the <u>new</u> | registered |
| | | | | | |
| New Registered Office Address: | | Enter Florida | ı street address | | |
| | | | Florida | | |
| | | City | | Zip Code | |
| New Registered Agent's Signature, if changing Regis | tered Agent: | | | | |
| I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan | nd complete _l ed age <mark>nt</mark> as p st er ed office | performance of m rovided for in Ch | y duties, and I am fan apter 605, F.S. Or, if i | iiliar witi this docu | h and ment is |

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 | Cornerstone Int'l Group (USA)LTD | c/o Advance Tax Inc. | ⊠ Add |
| | | 1101 E. Garvey Ave., #208 | □Remove |
| | | Monterey Park, CA 91755 | |
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| | AUGUST 1 | . 2022 | | | |
| ctive date, if other than the date ffective date is listed, the date must be | te of filing: | o date of filing or more t | (optional) han 90 days after filing.) | Pursuant to 6 | 05.02 |
| : If the date inserted in this block | does not meet the applica | ble statutory filing re- | quirements, this date v | vill not be li | isted |
| ment's effective date on the Depar | rtment of State's records. | | | | |
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| ord specifies a delayed effective da filed. | ne, but not an effective tir | ac, at 12101 a.m. on u | ne camer or. (0) The | . Zom uny m | ., 11 |
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