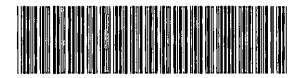
L220000041604

(F	Requestor's Name)	
(/	Address)	
(/	Address)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
J)	Business Entity Name)	
(I	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	o Filing Officer:	
	J. HORNE	
<i>!</i>	AUG - 1 2022	

Office Use Only



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COVER LETTER

Registration Section Division of Corporations

TO:

CHAIN AND CHAIN	ICE SALES LLC.		
NOBILET:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ELVA E. ALFONSO		
		Name of Person	
	IST CHOICE SALES LL	C.	
		Firm/Company	
	5901 MIAMI GARDENS	DRIVE STE # 305	
		Address	
	MIAMI, FL 33015		
		City/State and Zip Code	
	elvaalfonso82@gmail.com		
	E-mail address: (to be used for future annual report not	itication)
For further information	concerning this matter, please c	all:	
ELVA ALFONSO		786 355-5484	
Name of Person			ne Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	S30.00 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 Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 ST CHOICE SALES 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 $\frac{01/21/2022}{}$	and assigned		
Florida document number L22000041604	 ·		2.1.3		
This amendment is submitted to amend the fo	llowing:		. •		
A. If amending name, enter the new name	of the limited liab	ility company here:			
IST CHOICE SALES LLC.					
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		5901 MIAMI GARDENS DRIVE STE # 305			
(Principal office address MUST BE A STRE		MIAMI, FL 33015			
		5901 MIAMI GARDEN	S DRIVE STE # 305		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33015			
B. If amending the registered agent and/or agent and/or the new registered office addr	<u>ess here</u> :		enter the name of the new registered		
Name of New Registered Agent:	ELVA E. ALFO	ONSO			
New Registered Office Address:	5901 MIAMI C	GARDENS DRIVE STE # 3	305		
	·	Enter Florida street	address		
	MIAMI		, Florida 33015		
		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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	ELVA E. ALFONSO	5901 MIAMI GARDENS DRIVE STE # 305	🗆 Add
		MIAMI, FL 33015	_
			Change
			🗀 Add
			□Remove
			□Change
			□Add
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Effect	tive date, if oth	er than the date	of filing:	/08/2022 ———————		(or	otional)	
(II an et Note:	If the date is liste.	d, the date must be sprted in this block d	ecific and canno oes not meet th	ot be prior to di he applicable	ate of filing or me statutory filing	ore than 90 days at grequirements, t	ter filing.) Pursua his date will not	nt to 605.0207 (3 t be listed as the
docun	nent's effective of	late on the Departi	nent of State's	records.		·		
ne reco ord is fi		layed effective date	, but not an er	lective time,	at 12:01 a.m. c	on the earlier of:	(b) The 90th (lay after the
Dated	04/08			22 				
		60	. (1)	0 ~				
		Signa	ture of a member	Mor authorize	d representative	of a member		
		` ' '				• • •		
	ELVA E. A		•	V				