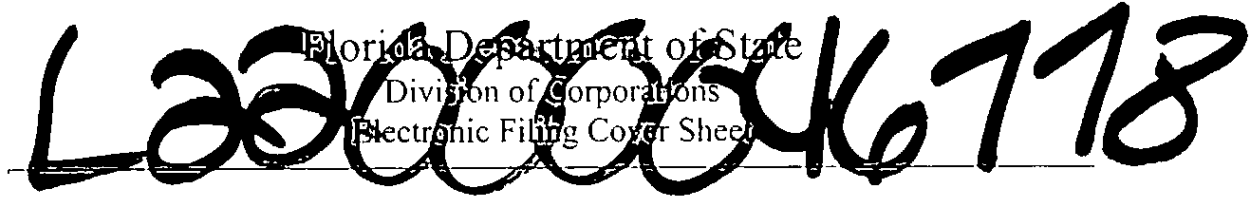


2/10/22, 2:37 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000055056 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JSD & COMPANY PA
Account Number : I20190000114
Phone : (786)286-2705
Fax Number : (305)901-6024

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sahirgonzalez@yahoo.es

2022 FEB 10 PM 4:07

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALESS PHARMA LLC

Certificate of Status	1
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FEB 11 2022

L220000046778
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

ALESS PHARMA 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 02/07/2022 and assigned Florida document number L22000046778.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1835 NW 112TH AVE SUITE 174

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33172

Enter new mailing address, if applicable:

1835 NW 112TH AVE SUITE 174

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33172

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

Name of New Registered Agent:

SAHIR J. GONZALEZ RODRIGUEZ

New Registered Office Address:

1835 NW 112TH AVE SUITE 174

Enter Florida street address

MIAMI

City

Florida

33172

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.

X

If Changing Registered Agent, Signature of New Registered Agent

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Π4400000000000000

11 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

[illegible]

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

N/A

E. Effective date, if other than the date of filing: 02/04/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated FEBRUARY 10, 2022_____
Signature of a member or authorized representative of a member

SAHIR J. GONZALEZ RODRIGUEZ

Typed or printed name of signee

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