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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO:

Registration Section
Division of Corporations

	CIENTOS, LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Kevin Rodriguez			
		Name of Person		•
	MIL SEISCIENTOS, LEC	•		
		Firm/Company		-
	10967 Lake Underhill Roa	ad, Ste. 142		S
		Address		N23F SECI
	Orlando, FL 32825			2023 FEB -8 PH 2: 0 SECRETARY OF STATE STALL ANASSEE. FI
		City/State and Zip Code		ARY OF
	kevin@dhernandezlaw.com			SEP PH
	E-mail address: (to be used for future annual report notific	ation)	E. S. S. S.
For further information of	concerning this matter, please c	all:		건품 으
Kevin Rodriguez		321 418-2832 at ()		
Name C	of Person		Telephone Number	-
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Address Registration Division of C P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporate Centre of Tall 2415 N. Monroe	orations llahassee	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIL SEISCIENTOS, LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our rec liability Company)	rords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000107055</u> .	were filed on $\frac{03/01/2022}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2073 F SECF TA
Enter now mailing address if applicables		HAY -8 F
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street ad	dress
		Florida Zip Code
	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Todd Rodriguez	817 Havenwood Drive	🗆 Add
		Orlando, FL 32828	≣Remove
			□Change
MGR	Leonardo Garcia	13048 WATERFORD WOOD CIRCLE	
		Orlando, FL 32828	■Remove
			□Change
MGR	Kevin Rodriguez	10967 Lake Underhill Road	■Add
		Ste. 142	🗆 Remove
		Orlando, FL 32825	□Change
			SECRETARY OF STATE
	 		Remove
			□Change
			□Add
			🗆 Remove
			□Change

					
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	ust be specific and cannot be prior to date oblock does not meet the applicable sta		filing.) Pursu		
e record specifies a delayed effect d is filed.	ive date, but not an effective time, at 1	2:01 a.m. on the earlier of: (b)) The 90th	day afte	r the
Dated January 26	· · · · · · · · · · · · · · · · · · ·				
Dated January 26	2023 Signature of a member or authorized re	presentative of a member			

Filing Fee: \$25.00