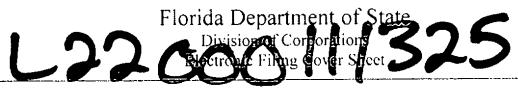
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Division of Corporations

Fax Number : (850)617-6363

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Account Name : LEGALZOOM.COM INC. Account Number : 120010900962

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COVER LETTER ...

TO:	Registration Sec Division of Cor		•	•
SUBJE	CASTELLA	ANO E-COMMERCE LLC		
SUBJE	C1:	Name of Limi	ted Liability Company	
		Amendment and fee(s) are sub-		
Pl c ase r	etum all correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	138 200
		Legalzoom.com, Inc.		
Finn/Company 101 N Brand Blvd 11th Fl				·
	Address			
		Glendale, CA 91203		
		Teens may 71 @gmail.com	City/State and Zip Code	
		Tangomax71@gmail.con E-mail address: (to be used for future amual report noul	ication)
For furt	ther information c	oncerning this nutter, please ca		
Cheye	enne Moseley		800 773-0888	
	Name o	í Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount		
□ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	MAH	ING ADDRESS:	STREET/COURF	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASTELLANO E-COMMERCE LLO				
Name of the Limited (A	<u>Llability Compa</u> Florida Limited I	ny as II now appears on our records. Liability Company))	
The Articles of Organization for this Limited Liab Florida document number £22000111325		were filed on 03/03/2022	and assigned	
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liab	ility company here:		
The new name mass be distinguishable and contain the word	ls "Limited Liabil	lity Commany " the designation "LLC"	of the abbreviation "L.L.C."	
		2606 S Garden Dr Building 1		
Enter new principal offices address, if applicab		Lake Worth, Florida 33461		
(Principal office address MUST BE A STREET.	<u>ADDRESS)</u>			
Page of applicable		2606 S Garden Dr Building 1	8 Apt 303	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	910	Lake Worth, Florida 33461		
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address her	€ :		
Name of New Registered Agent:			2022	
	2606 S Garde	en Dr Building 18 Apt 303	AP AP	
New Registered Office Address:		Enter Florida street address		
	Lake Worth	, Flo	rida 33461"	
		Crip	Zip Corte	
New Registered Agent's Signature, if changing Re-	gistered Agent:		7:0	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the re- company has been notified in writing of this ch	and complete ered agent as gistered office	r performance of my dutics, an provided for in Chapter 605, I	d I am familiar with and F.S. Or, if this document is:	
	If Cha	noing Registered Avent, Signature o	f New Registered Agent	

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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
AMBR	Adonis E Moreno		□ Add
			Remove
		2606 S Garden Dr Building 18 Apt 303 Lake Worth, Florida 33461	■ Change
			□ Add
			☐ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
		<u> </u>	Remove
			☐ Cliange
			□ Remove
			Clunge
			Add
			□ Remove
			□ С'hалде

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D. If amo	ending any o	ther information, en	ter change(s) here: /Attach addi	tional sheets, if necessary.)	
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E Effect	tivo dato if c	wher then the date of	f filing:	(optional)	
Note:	If the date in	sted, the date must be speci serted in this block doc- te date on the Departme	f filing: ific and cannot be prior to date of filing or s not meet the applicable statutory fil at of State's records	more than 90 (lays after filing.) Pursual ing requirements, this date will not	it to 605.0207 (3)(b) be listed as the
docun	nem 8 cheenv	e and on the Experime	IN OF CHIEF FIX OF MO.		
If the re (b) The	cord specific 90th day	les a delayed effec after the record is	tive date, but not an effective filed.	e time, at 12:01 a.m. on the	earlier of:
	April 5th		2022		

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Signature of a member or authorized representative of a member

Typed or printed name of signee

Adonis E Moreno

Filing Fee: \$25.00