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.

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To:

Division of Corporations

3052201440

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Emai	l Ad	dre	SS	:
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SVARDI STUDIO LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25,00

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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SVARDI STUDIO LLC	- C	<del></del>
(A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 03/17/2022	and assigned
Florida document number L22000111362		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		***************************************
) If amounting the surface of a surface of the surf		
I. If amending the registered agent and/or registered gent and/or the new registered office address bere:	office address on our records, enter the near	ie of the new regis
		3
Name of New Registered Agent:		4
New Registered Office Address:		ζĺ
	Enter Florida street oddress	6.3 70 7. 5
	Florida	
	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.

19/26/2023 16:35 3052201440 LAZARUS CORPORATE PAGE 03/04

## 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

Title	<u>Name</u>	Address	Type of Action
AMBR	MARCO A. DIAZ	2145 SW 19TH TER	
		MIAMI, FL 33145	
AMBR	ELIZABETH L. VILLAMIL	2145 SW 19TH TER	<b>=</b> Add
		MIAMI, FL 33145	□Remove
			□ Change
MGA	ELIZABETH L.VILLAMIL	2145 SW 19TH TER	
		MIAMI, FL 33145	
			Сhange
MGA	MARCELO E.SUYON VILLAMII	2145 SW 19TH TER	
,		MIAMI, FL 33145	
			Change
			□Remove
			□ Change
			□Add
			□ Remove

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Hective date, if other than the can effective date is listed, the date must ote: If the date inserted in this block becament's effective date on the Department's	be specific and cannot be p ok does not meet the an	rior to date of filing or m		ind) ling.) Pursuant to 605.02 late will not be listed
ecord specifies a delayed effective is filed.	date, but not an effectiv	re time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after th
OCTOBER 4,	, 2023	<del></del> '		
	11.			
V J. Man J	gnature of a member or a			