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SECRETARY OF STATE
TAIL ALLACEDES

A. BUTLER APR 2 2 2022

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
enn arzer.	FERRECO	NSTRUCCIONES Q 2002 LL		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		JOSE D SIRA PINTO		
			Name of Person	-
		FERRECONSTRUCCION	ES Q 2002 LLC	
			Firm/Company	
		18117 BISCAYNE BLVD	3112	
			Address	
		AVENTURA, FL 33160		
			City/State and Zip Code	
		USTUEMPRESA@GMAH E-mail address: (COM to be used for future annual report no	otilication)
For further in	iformation c	oncerning this matter, please ca	-	
JOSE D SIR.	A PINTO		786 340-0372	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 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)
	ling Addres		Street Address: Registration S	Section
Division of Corporations P.O. Box 6327		Division of Co	Division of Corporations The Centre of Tallahassee	
	i. 130x 052 lahassee, I			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

FERRECONSTRUCCIONES O 2002 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECOLO SECRETARY OF S The Articles of Organization for this Limited Liability Company were filed on 03/05/2022 TALLAHASSEE and assigned Florida document number 1.22000114153 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NA The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: NA Name of New Registered Agent: NA. New Registered Office Address: Enter Florida street address

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.

NA

If Changing Registered Agent, Signature of New Registered Agent

____. Florida ^{NA}___

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	ERIC QUINTERO	18117 BISCAYNE BLVD, #3112	= Add
		AVENTURA, FL 33160	□Remove
			□Ghange
NA	NA	NA	
			□Remove
			☐ Change
NA	NA	NA	
		□ Remove	
		-	□ Change
NA	NA NA	NA	
			Remove
			Change
NA NA	NA		
		□Change	
NA NA	NA		
			□Remove
			□Change

Page 2 of 3

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