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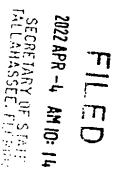
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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

	ORLD IMPORT & EXPORT	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	indence concerning this matter	-	
	CARLOS BISIO		
		Name of Person	
	FASTFORWARD TRADI	NG COMPANY LLC	
	• •	Firm/Company	
	1845 NW 112 TH AVENU	JE STE 203, MIAMI FLORIDA	
		Address	 .
	33172		
	-	City/State and Zip Code	
	info@fastfwdus.com		
	E-mail address: (to be used for future annual report n	otification)
For further information of	concerning this matter, please c	all:	
CARLOS BISIO		786 4956610	
Name o	of Person		ime 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)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of C	orporations
P.O. Box 632	27	The Centre of	f Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLESOF	ROANIZATION	~~
О	F	2022 APR -4 SECRETARY
		AE A TI
GREAT WORLD IMPORT & EXPORT LLC		S ≥ 1 ==
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) hability Company)	100 3
The Articles of Organization for this Limited Liability Company	were filed on	Earld assigned
Florida document number L22000115469		<u> </u>
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	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
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 a agent and/or the new registered office address here:	ddress on our records, enter the na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida _	Zin 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	LLERENA LUIS DAVID	1845 NW 112 TH AVENUE STE 203, MIAMI, FL	= Add
		33172	□Remove
			DAdd
			Remove
			☐ Add ☐ Remove ☐ Change ☐ C
			□Add
			Remove
			□Add
			Remove
			□Ađd
			□Remove
			Change
			□Add
			□Remove
			□ Change

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		•		-
NAZAL, PIERO - MANAGER		Typed or printed n	ame of signee	