Division of Corporations



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.

(((H22000145077 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## NE 12240, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ; ARTICLES OF ORGANIZATION OF

0, LLC	
any as it now appears on our records.) Liability Company)	
were filed on03/23/2022	and assigned
flity company here:	
lity Company," the designation "LLC" or the a	abbreviation "LL.C."
MIAMI, FL 33137	
2020 N. BAYSHORE DR. #603	
MIAMI, FL 33137	
Enter Florida street address	ne of the new registered APPROVILU
, Florida	Zip Coe
	were filed on

## 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 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>	Address	Type of Action
MMBR	MARISSA NUNEZ-VILCHES	2020 N. BAYSHORE DR. #2409	□Add
		MIAMI, FL 33137	≅Remove
		<del></del>	☐ Change
MMBR MARISSA NUNEZ-VILO	MARISSA NUNEZ-VILCHES	2020 N. BAYSHORE DR. #603	■Add
		MIAMI, PL 33137	□Remove
			Change
			□Remove
		Change	
			□ Add
			□Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			Change
<del></del>			□Add
			🗀 Каточе
			□ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
1	9/A ,
-	
-	
-	
-	
-	
-	
_	
_	
_	
_	
_	
_	
_	
i cffic <u>te:</u>	we date, if other than the date of filing:  elive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
cord s file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ed .	20TH DAY OF APRIL 2022
	Signature of a member of authorized representative of a member
	,, ,
	MARISSA NUNEZ-VILCHES  Typed or printed name of signee