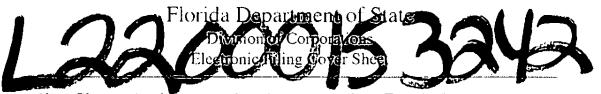
Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (844)449-3624

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALFA ERRE HOLDINGS LLC Certificate of Status 0

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JAN 26 2024

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALFA ERRE HOLDINGS LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000153242</u> .	were filed on 03/30/2022 and assigned	
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:	14231 sapelo beach dr	
(Principal office address MUST BE A STREET ADDRESS)	orlando, FL 32827	
Enter new mailing address, if applicable:	PO BOX 331825	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33233	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	nddress on our records, <u>enter the name of the new registere</u>	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	City OZip ee	
New Registered Agent's Signature, if changing Registered Agent:	10: <b>5</b>	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

## 01/25/24 10:43AM 5125970678

5/24 10:43AM 5125970678 18506176383 Pg 3/4
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
AMBR	roberto eduardo lopez cano	14231 Sapelo Beach Dr	
		Orlando, FL 32827	□Remove
			<b>■</b> Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Change
			□Remove
			Change
			□Add
			□Remove
			☐ Change
			□Add
			Remove
			[] Change
			Remove
			Change

development, rea	al estate, retail sales, property management, vehicle ownership,
rental and manaş	gement, other business services
	<del></del>
<del></del>	
(If an effective date is listed Note: If the date insert	er than the date of filing:
f the record specifies a dela ecord is filed.	ayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2024
/s/ roberto	o eduardo lopez cano
	Construction of a manufacture of a manuf
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00