Florida Department of State

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H220004159343ABC/

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUNBIZ ONLINE LLC

Account Number : I20210000128

Phone : (305)244-9500 Fax Number : (954)827-9354

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 FLORA INTERNATIONAL LLC

Certificate of Status	0
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C. BRUMBLEY

DEC 13 2022

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Corporate Filing Menu

Help

COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		TERNATIONAL LLC		
SUBJECT:		Name of Lin	nited Liability Company	······································
The encloses	d Articles of A	Amendment and fee(s) are sub	united for filing	
		ndence concerning this matter	-	
		CATALINA RAMIREZ		
			Name of Person	
		SUNBIZ ONLINE LLC		
			Firm/Company	
		1401 SAWGRASS CORP	OTE PKWY SUITE 200	
			Address	
		SUNRISE, FL 33323		
			City/State and Zip Code	
		CATALINA@SUNBIZON		
transferment	_ &		to be used for future annual report not	rication)
		meerning this matter, please c		
C ATALINA	A RAMIREZ		305 244-9500 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a	a check for the	e following amount:		
■ \$25.00 E	Filing Fee	S30.00 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)
Re	iling Address gistration Society	ection	Street Address: Registration Se	
	vision of Co D. Box 6327	•	Division of Cor The Centre of 1	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORA INTERNATIONAL LLC		022 TA
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on ou orida Limited Liability Company)	7 (22)
The Articles of Organization for this Limited Liability Florida document number 1.22000176213	y Company were filed on 04/07/202	高 7 「
This amendment is submitted to amend the following	y.	T _E 3
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "l	Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	ered office address on our records e:	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	u address
		Florida
	Сиу	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.

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	Name	Address	Type of Action
MGR	DANIELA RONDON RENDON	1001 BRICKELL BAY DR SUITE 2700	■Add
		MIAMI. FL 33131	
			□ Change
		***************************************	🗆 Add
			□Remove
			☐ Change
			🖸 Add
			□Remove
		,	□Change
			🖾 Add
			□Remove
			ClChange
			🗆 Add
			□Remove
			DChange
			□Remove
			□Change

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JUND CIONET)ater	DECEMBER 8 2022
Signature of a member or authorized representative of a member		LUND CITA
		Signature of a member or authorized representative of a member
		JUAN C RONDON

Filing Fee: \$25.00