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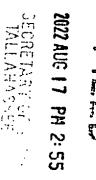
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## **COVER LETTER**

TO:

TO: Registration S Division of Co			
	GROUP LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ANDRES HURTADO		
		Name of Person	<del></del>
	PRODEZK INC		
		Firm/Company	
	848 BRICKELL AVE, ST	E 950	υ <b>Ξ</b>
	<del></del>	Address	150 B
	MIAMI, FLORIDA 33131		FE :
	<u></u>	City/State and Zip Code	
	INFO@PRODEZK.COM		
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report notif	SECRETARY SECTION Incation)
ANDRES HURTADO	)	at ( ÷1 ) 78697794	21
Name	of Person	Area Code Daytime	· Telephone Number
Enclosed is a check for	the 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)
Mailing Addre		Street Address: Registration Sec	tion
Registration Division of	Corporations	Division of Cor	
P.O. Box 63	27	The Centre of T	allahassee
Tallahassee.	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RETINOS GROUP LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{04/28/2022}{}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 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.

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	<u>o n</u>
MGR	FLOR ANGELA DAZA ESCOBAR	2231 SETTLERS TRAIL	□Add	
		ORLANDO, FL 32837	■Remove	
			□Change	
MGR	CARLOS ALBERTO GONZALEZ DAZA	2231 SETTLERS TRAIL	□Add	
		ORLANDO, FL 32837	Remove	
			□Change	
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Iffective date, if other than the off an effective date is listed, the date must	be specific and can	not be prior to	date of filing or	more than 90 da	(optional) ys after filing.	) Pursu:	ant to 60	5.0207 (
Note: If the date inserted in this blo document's effective date on the De	ck does not meet	t the applicab	le statutory fi	ing requiremen	its, this date	will no	ot be lis	ated as t
idelinent's effective date on the De	partificit of State	e s records.						
record specifies a delayed effective	date, but not an	effective time	e, at 12:01 a.r	n, on the earlie	rof:(b) Th	e 90th	day aft	er the
d is filed.								
AUGUST 5TH	7	2022						
Dated Addos 1911	· -		. •					

Filing Fee: \$25.00

Typed or printed name of signee