## T99000911009

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRUPO TLC 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 I  | Liability Company   | were filed on $\frac{05/0}{}$         | 7/2022 and assigned  |  |
|--|---|---------------------------------------|--|--|
| Florida document number 1.22000217062  | ·   |                                       |  |  |
| This amendment is submitted to amend the fol   | lowing:   |                                       |  |  |
| A. If amending name, enter the new name  | of the limited liab   | ility company her                     | <u>e</u> :   |  |
| NA   |   |                                       |  |  |
| The new name must be distinguishable and contain the   | words "Limited Liabi  | lity Company." the de                 | signation "L.L.C." or the abbreviation "L.L.C."                                |  |
| Enter new principal offices address, if applicable:  |   | NA                                    |  |  |
| (Principal office address MUST BE A STRE.  | ET ADDRESS)   |                                       |  |  |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |   | NA                                    |  |  |
|  |   |                                       |  |  |
| B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:  |   |                                       | corus, enter the hame or the new registered                                    |  |
| New Registered Office Address:   | 19370 COLLIN  | NS AVE APT 1014                       |  |  |
| New Registered Office Address.   | Enter Florida street address                                |                                       |  |  |
|  | SUNNY ISLES   | S BEACH                               | Florida <u>33160</u>   |  |
|  |   | City                                  | Zip Code   |  |
| New Registered Agent's Signature, if changing  | Registered Agent:   |                                       |  |  |
| I hereby accept the appointment as register provisions of all statutes relative to the propactions of my position as regions of the obligations of my position as regions filed to merely reflect a change in the company has been notified in writing of this | per and complete<br>gistered agent as<br>gregistered office | performance of i<br>provided for in C | ny duties, and I am familiar with and napter 605, F.S. Or, if this document is |  |
|  |   | Valery                                | Urweta nt, 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> | <u>Name</u>              | <u>Address</u>              | Type of Action |
|--------------|--------------------------|-----------------------------|----------------|
| MGR          | JHONNY J TORRES QUERALES | 19370 COLLINS AVE 1014      | □Add           |
|              |                          | SUNNY ISLES BEACH, FL 33160 | ≣Remove        |
|              |                          |                             | □Change        |
| MGR          | VALERY A URUETA          | 19370 COLLINS AVE APT 1014  | <b>≡</b> Add   |
|              |                          | SUNNY ISLES BEACH, FL 33160 | □Remove        |
|              |                          |                             | □Change        |
| NA           | NA                       | NA                          | □Add           |
|              |                          |                             | □Remove        |
|              |                          |                             | □ Change       |
| NA           | NA                       | NA                          | 🗆 Add          |
|              |                          |                             | □Remove        |
|              |                          | <del></del>                 | □Change        |
| NA           | NA                       | NA                          | □Add           |
|              |                          |                             | □Remove        |
|              |                          | -                           | □ Change       |
| NA           | NA                       | NA                          | 🗆 Add          |
|              |                          |                             | □Remove        |
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| }ffecti               | date, if other than the date of filing:   |
| lf an eff             | date, if other than the date of filing: (optional) we 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 605.020 |
|                       | he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a 's effective date on the Department of State's records.             |
| accum                 | served ve date on the peparatent of state s records.  |
|                       |   |
| e record<br>rd is fil | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the   |
| 10 13 111             |   |
|                       | GUST 01ST 2022  |
| Dated <sub>.</sub>    | GUST 01ST 2022  |
|                       |   |
|                       | Signature of a member or authorized representative of a member  |
|                       | signature of a member or authorized representative of a member  |
|                       |   |

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