

L22000218833

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CONTADORMIAMI.COM INC  
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**\*\*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  
SAJRS LLC**

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

A. RAMSEY

SEP 13 2022

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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FILED

2022 SEP 13 PM 12 37

SAJRS 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 05/10/2022 and assigned  
Florida document number L22000218833.

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:

1571 SAWGRASS CORP. PKWY Suite 110

**(Principal office address MUST BE A STREET ADDRESS)**

SUNRISE, FL, 33323

Enter new mailing address, if applicable:

1571 SAWGRASS CORP. PKWY Suite 110

**(Mailing address MAYBE A POST OFFICE BOX)**

SUNRISE, FL, 33323

**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

Florida

City

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 Changing Registered Agent, Signature of New Registered Agent**

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SANTOS GAVIRIA, JOSE	1571 SAWGRASS CORP. PKWY Suite 110	<input type="checkbox"/> Add
		SUNRISE, FL, 33323	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MORALES ARBELAEZ, SABRINA	1571 SAWGRASS CORP. PKWY Suite 110	<input type="checkbox"/> Add
		SUNRISE, FL, 33323	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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