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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS FILINGS INC

Account Number : I20220000042 Phone : (786)370-2432 Fax Number : (786)866-6349

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

Email Address: VIGOVIGOCPA@aol.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PALM BEACH HOME DECOR LLC

AM 10: 23	OF STATE PPORATIONS
2023 JUL 13	DEPARTMENT OF STATE DIWISION OF STATE TABLES OF CORPORATIONS TALLABASSEE. FLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALM BEACH HO			27	
(Name of the United Liability Compan (A Fjorida Limited L	ny as it now appears o lability Company)	n our records.)	دے دے	
The Articles of Organization for this Limited Liability Company Elocida document number L22000231840	were filed on	05/27/2022	ـَــ and assigned دی	
Florida document numberL22000231840			E. C.	
This amendment is submitted to amend the following:			- =	
A. If amending name, enter the new name of the limited liabi	lity company here	:	20	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable: 5805 BLUE LAGOON			OR, STE 300	
(Principal office address MUST BE A STREET ADDRESS)	NALABAL CL 2212C			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5805 BI	UE LAGOON DE MIAMI, EL 3312		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our rec	ords, <u>enter the nam</u>	e of the new register	
Name of New Registered Agent:	& J MANAGEMENT CORPORATION			
New Registered Office Address:	5805 BLUE LAGOON DR, STE 300			
Feb 1	Enter Florida street address			
	MIAMI	, Florida	33126	
 	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

From: EXPRESS FILINGS INC

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

(((H23000244158 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RICARDO FRANCO ZUCCOLO	5805 BLUE LAGOON DR, STE 300	O _{Add}
		MIAMI, FL 33126	Remove
			Change
MGR	MARIA REGINA TRANCHESI ZUCCOLO	5805 BLUE LAGOON DR, STE 300	O_{Add}
		MIAMI, FL 33126	_ ORemove
			_ OChange
			_ O _{Add}
			ORemove
			_ OChange
			
			_ Окепкоче
			Change
			_ Oadd
			_ ORemove
			_ OChange
			Remove
			_ Ochange

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	ies a delayed effective date	, but not an ei	ffective time, a	it 12:01 a.m. on	the earlier of: (b) The 90th day a	fter the
d is filed.			2023				
	07/12	·	·				
	07/12						
d is filed.		ure of memb		representative of	a momber		

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