L22000259031

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COVER LETTER

то:	Registration Se Division of Cor						
, SUBJEC	SIMPLE F	OUR LLC	•				
SUBJE	or:	Name of Limited Liability Company					
		Amendment and fee(s) are sub					
		ANDREY LANDIN	to the following.				
			Name of Person				
			Firm/Company				
		3800 S OCEAN DR STE 216					
		Address					
		HOLLYWOOD, FL 33019					
		City/State and Zip Code INFO@CORONATAXUSA.COM E-mail address: (to be used for future annual report notification)					
For furth	er information c	oncerning this matter, please c	all:				
ANDRE	EY LANDIN		954 646-2777				
	Name o	f Person	at () Area Code — Dayti	me Telephone Number			
Enclosed	l is a check for th	ne following amount:					
■ \$2 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addres	<u>s:</u>	Street Address:				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SIMPLE FOUR 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 $\frac{06/06/2022}{1}$ and assigned Florida document number 1.22000259031 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 . Florida

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

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
MGR	ALEVTINA LANDINA	5012 GREENWAY DR	= Add
		HOLLYWOOD, FL 33021	□Remove
			□Change
		_	⊡Add
			□Remove
			© Change
		_	⊑Add
			□Remove
			□Change
			□Remove
			Change
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Note:	ve date, if other than the date of filing:
he recor ord is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	09/15/2023
	Ar
	Signature of a member or authorized representative of a member