Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053 Phone : (561)694-8107

: (561)214-8442 Fax Number

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

Email	Address:	_,					
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JULIAN DIAZ, LLC

C. BRUMBLEY UEU 16 2022

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Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Julian Diaz, LLC		
(Name of the Limited Liab) (A Florid	lity Company as it now appears on our record da Limited Liability Company)	<u>(1s.)</u>
The Articles of Organization for this Limited Liability	Company were filed on 06/24/2022	and assigned
Florida document number L22000286136	 '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited 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 ADD	<u>RESS)</u>	·····
		022 E-38
		EC =
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	· · · · · · · · · · · · · · · · · · ·	だされた name of the new registered
Name of New Registered Agent:		
		···
New Registered Office Address:	Emer Florida street addre	Υ,
	,FI	orida
	City	orida 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 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	MARIANA GUTIERREZ GARCIA	848 BRICKELL AVENUE I SUITE 903	
		MIAMI, FL 33131	
			□Change
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
		-	□Remove
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			□Remove
			Change

Effective date, if other than the date of filing: (If I an effective date is listed, the date must be specific and cames be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0.207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as idecument's effective date on the Department of State's records. the record 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 cord is filed. Dutted December 15 2022 Jan. When Signature of a member or authorized representative of a member.		 			_
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JULIAN DIAZ, MGR, By: Lauren Underwood, Attorney-in-Fact			d name of signee		

Filing Fee: \$25.00