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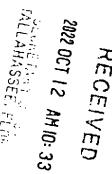
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COVER LETTER

TO:

Registration Section

Division of Corporations CAPE CORAL INTERNATIONAL GROUP LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: CATALINA REY, ESQ. Name of Person BR LAW GROUP LLC Firm/Company 1395 BRICKELL AVENUE SUITE 800 Address MIAMI, FLORIDA 33131 City/State and Zip Code CATALINA@BRLAWGRP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CATALINA REY 702-0078 786 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ■ \$25.00 Filing Fee ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 OCT 12 PH 12: 07

CAPE CORAL INTERNATIONAL GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.) TALL AHASSEE, FL

The Articles of Organization for this Limited Liability Company Florida document number L22000292521	were filed on 06/29/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
FURNI LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "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 agent and/or the new registered office address here:	address on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	
	Florido	
	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am fa provided for in Chapter 605, F.S. Or, ij	miliar with and Tthis document is
H Chan	nging Registered Agent, Signature of New Regis	stered 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

Title	<u>Name</u>	Address	Type of Action
MGR	BR MANAGEMENT LLC	1395 BRICKELL AVENUE, SUITE 800	□ Add
		MIAMI, FLORIDA 33131	\alpha Remove
		· · · · · · · · · · · · · · · · · · ·	Change
MGR	EVELYN D. LEWINSOHN	1401 SAWGRASS CORPORATE PARKWAY	\ \ \ \ \ \ \ \ \ \
		SUITE 189	□Remove
		SUNRISE, FL 33323	□Change
			□Add
			□Remove
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ecord specifies a delayed effect s filed.	ive date, but no	ot an effective 1	ime, at 12:01 a.	m. on the earlie	r of: (b)]	The 90th d	ay after the
OCTOBER 10		2022	·				
OCTOBER 10 Claudio Cordero Claudio Cordero (Oct. 11, 2022 17.8	SB AUT)		·	tive of a member			

Filing Fee: \$25.00