

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L220002479373ABC358

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC
Account Number : I20200000121
Phone : (770)928-2706
Fax Number : (888)772-8108

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NEW WAY 22 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
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APPROVED
K. Brumley
FILED

2022 JUL 21 PM 3:16

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JUL 22 2022

K. Brumley

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NEW WAY 22 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 07/14/2022 and assigned Florida document number 122000314358.

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** _____
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

2022 JUL 21 PM 3:43
Ar:Mike
A:Kid
F:LiD
L:43

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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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	LONDONO BOTERO, OSCAR J	328 ARBOR LAKES DR DAVENPORT, FL 33896	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	LONDONO BOTERO, JORGE B	328 ARBOR LAKES DR DAVENPORT, FL 33896	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	BOTERO BOTERO, LUIS A	328 ARBOR LAKES DR DAVENPORT, FL 33896	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated JULY 19TH 2022

Luis Adolfo Botevo B

Signature of a member or authorized representative of a member

LUIS A. BOTERO BOTERO

Typed or printed name of signer

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