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## **COVER LETTER**

Registration Section Division of Corporations

TO:

MAKING A	AMERICA LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CARLOS BISIO		
		Name of Person	
	FASTFORWARD TRADI	NG COMPANY LLC	
		Firm/Company	
	1845 NW 112TH AVE SU	HTE 203	- 3
		Address	
	MIAMI, FLORIDA 33172		
		City/State and Zip Code	<del></del>
	info@fastfwdus.com		·
	E-mail address: (	to be used for future annual report no	otification)
For further information c	oncerning this matter, please ca	nll:	
CARLOS BISIO		786 495-6610 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 5 Division of C P.O. Box 632 Tallahassee, I	Section Torporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Mont Tallahassee, F	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAKING AMERICA LLC

company has been notified in writing of this change.

(Name of the Limit	ed Liability Compa (A Florida Limited	any as it now appears on our d Liability Company)	records.)	
The Articles of Organization for this Limited L Florida document number L22000325968	iability Company	were filed on	and assigned	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liah	oility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	able:	3475 NE 163rd ST	*~1	
(Principal office address MUST BE A STREE		MIAMI BEACH, FL	,	
		33160	,	
			•	
Enter new mailing address, if applicable:		3475 NE 163rd ST		
(Mailing address MAY BE A POST OFFICE	BOX)	MIAMI BEACH, FL		
	<del></del>	33160		
B. If amending the registered agent and/or ragent and/or the new registered office address	ss here:		enter the name of the new registered	
Name of New Registered Agent:	CARLOS BISI	10		
New Registered Office Address:	1845 NW 112TH AVE SUITE 203			
	Enter Florida street address			
	MIAMI		_, Florida 33172 Zip Code	
New Registered Agent's Signature, if changing I	Registered Agent:	•	Zip Code	
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi- being filed to merely reflect a change in the	er and complete stered agent as f	performance of my duti provided for ih Chapter	es, and I am familiar with and 605, F.S. Or, if this document is	

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>	Name	Address	Type of Action
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		<del> </del>	□Remove
		<u></u>	☐Change
			□Add
		<del></del>	□Remove
		<del></del>	□Change
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ective date, if other than the date in effective date is listed, the date must be space. If the date inserted in this block document's effective date on the Department.	ecific and cannot be prior ses not meet the applica	able statutory filing req		
cord specifies a delayed effective date s filed.	, but not an effective ti	me, at 12:01 a.m. on th	e earlier of: (b) The 90t	h day after th
JANUARY 13	2023	12	7	
	MIL			

Filing Fee: \$25.00

Typed or printed name of signee