

Florida Department of State

L22000331067
 Division of Corporations
 Electronic Filing Cover Sheet

H220002795573

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To:

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

From:

Account Name : GLOBAL ACCOUNTING AND TAX PROFESSIONAL CORP
 Account Number : I20140000098
 Phone : (786)372-1391
 Fax Number : (786)762-2589

2022 AUG 18 PM 4:11
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FL

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 COMMUNITY USA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

C. BRUMBLEY

AUG 19 2022

H 220002795573

2022 AUG 18 11:10:07

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H220002795573

COMMUNITY USA 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/ 27 2022 and assigned
Florida document number L22000331067.

This amendment is submitted to amend the following.

A. If amending name, enter the new name of the limited liability company here:

N / A

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:

N / A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF STATE
TALLAHASSEE, FL

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

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If on(s) authorized to manage, enter the title, name, and address of No. 0266-son F. Sig added
or removed from our records:

MGR = Manager

AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DELGADO-JARAMILLO, WILFF	7500 NW 25TH STREET	<input type="checkbox"/> Add
		SUITE 246	<input checked="" type="checkbox"/> Remove
		MIAMI FL 33122	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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N / A

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.

Dated 08/17, 2022

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Signature of a member or authorized representative of a member

WILFRAND DELGADO-JARAMILLO

Typed or printed name of signee