8/3/24, 3:17 PM

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565 Fax Number : (954)385-5175

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIG CASA FLORIDA INVESTMENTS LLC

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Page Count	05
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T. LEMIEUX Help JUN - 4 2024

COVER LETTER

TO:	Registration Se Division of Cor		•		•
CHID TO	Z CASA FLO	ORIDA, INVESTMENTS LLC		٠,	
SUBJE	.t. 1;	Name of Limi	ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
•		DIEGO FIGUEROA			
			Name of Person		
		E & F LATIN GROUP LL	.C		
		-	Firm/Company		
		1820 N CORPORATE LA	KES BLVD SUITE 109		
			Address		
		WESTON, FL 33326			
			City/State and Zip Code		
		diego@eflatinaccounting.co			
			to be used for future annual	report notification)	
For fur	ther information c	concerning this matter, please co	all:		
DIEGO	O FIGUEROA		954 3	84 8565	
	Name o	f Person	at () Area Code	Daytime Telepho	ne Number
Enclosi	ed is a check for th	he following amount:			
≅ \$2.	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres	U :	Street As	idress:	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASA FLORIDA INVESTMENTS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company	were filed on07/28/2022	and assigned
Florida document number L22000334735		
This amendment is submitted to amend the following:		
A: If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	" or the abbreviation "E.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	150 SE 25 RD UNIT 10 E	
	MIAMI, FL 33129	
		2024
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	150 SE 25 RD UNIT 10 E	
	MIAMI, FL 33129	
		φ Ξ 5
B. If amending the registered agent and/or registered office a	address on our records, enter	
agent and/or the new registered office address here:		Tr. 7
		•
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	7.7
	, Flo	orida
	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 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	Name	Address	Type of Action
			ÜAdd
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			ÜAdd
			□Remove
			☐ Change
·		<u></u>	ŪAdd
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			FiChange
			□Add
			□Remove

_____ Change

amenang any omer morma	tion, enter change(s) here: (Attach additional shee	ns, g necessary.
		
		,,
		······································
		<u></u>
Tective date, if other than the in effective date is listed, the date mul ote: If the date inserted in this bi	date of filing: It be specific and cannot be prior to date of filing or more than 90 ock does not meet the applicable statutory filing requires	(optional) 0 days after filing.) Pursuant to 605 0207 ments, this date will not be listed as
cument's effective date on the D	epartment of State's records.	
coord specifies a delayed effectiv is filed.	e date, but not an effective time, at 12:01 a.m. on the car	rlier of: (b) The 90th day after the
ned MNE 3	. 2024	
S	Diego Figueron	
	Signature of a member or authorized representative of a member	ner
	DIEGO FIGUEROA	
	Typed or printed name of signee	

Filing Fee: \$25.00