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Account Name : CONTADORMIAMI.COM INC

Account Number : I20200000130 Phone : (954)345-7888 Fax Number : (786)713-1940

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From: TAXLEAF.COM CONTADORMIAMI.CO

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

	SOFLOW IV			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it inw appears on o Liability Company)	our records.)	
The Articles of Organization for this Limited I Florida document number L22000336171	Jability Company	were filed on 07/29/2	022	_ and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited ligh	oility company here:		
The new name must be distinguishable and contain the	idai.1 bətimi.1" staqw	lity Company," the designa	ition "LLC" or the appre	viation "L.L.C."
Enter new principal offices address, if appli	cable:	33 SE 7TH ST STE I	· ·	
(Principal office address MUST BE A STRE		BOCA RATON,FL.	3432	: 10 8
				200 28 SEP
Enter new mailing address, if applicable:		33 SE 7TH ST STE I		EP - I
(Mailing address MAY BE A POST OFFICE BOX)		BOCA RATON,FL.3	13432	2:
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office :	address on our recore	is, <u>enter the name (</u>	5. E. S.
Name of New Registered Agent:	ALISHAEV, Z	ZAHAVA		
New Registered Office Address:	33 SE 7TH ST	STE L Enter Florida st	ect address	·
	BOCA RATO	N	, Florida <u>3343</u> .)
		City		Zip Cock

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	ALISHAEV, ZAHAVA	33 SE 7TH ST STE L	□Add
		BOCA RATON.FL 33432	[]Remove
			#Change
MGR	ZAVUROV, GABRIEL	33 SE 7TH ST STE I.	DAdd
		BOCA RATON,FL 33432	□Remove
			UAdd
			Remove SEP
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			□Change

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Dated	2022		
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<u></u>	gnature of a member or authorized representation	ve of a member	-
•			
	ZAHAVA ALISHAEV		