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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

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Account Name : ARIMIR SERVICES GROUP LLC

Account Number : 120200000022 Phone : (305)298-6579 Fax Number : (305)643-5225

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

Emall Address: Joyaniee Omybues. net

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Name of the Limited (A	Lindliny Company as it now appears on our records.) Florida Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liab Florida document number L22000368893	ility Company were filed on 08/23/2022	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	.
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>x)</u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	ntered office address on our records, <u>enter the namere</u> :	ne of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Esser Florido street address Florida	AND AND FILED 30 PH
_	City	Elp Code ?
New Begistered Agentle Cignoture if changing Dagis	tered 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 heing 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

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	<u>Name</u>	Address	Type of Action
MGR	MARTIN GONZALEZ SOTO	CRA 52 NO 7 SUR 85.	
		MEDELLIN, COLOMBIA	Remove
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			□Add
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Effective date, if other than to fin effective date is listed, the date in Note: If the date inserted in this document's effective date on the	he date of fili nust be specific a block does not Department of	ng; nd cannot be pri t meet the appl State's record	or to daze of filing icable statutory s.	or more than 90 ds filing requirement	(optional) ys after filing.) Pu nts, this date wil	rsuant to 605,0207 I not be listed as
record specifies a delayed effect d is filed.	ive date, but no	ot an effective	time, at 12:01 в	m, on the earlier	of; (b) The 90	th day after the
Dated AUGUST 30		2022	·			
	ADICK	ocha (}			
	Signature of a	member or auti	norized representa	tive of a member		