Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTADORSUNNYISLES.COM INC

Account Number : I20200000118 : (305)260-6968 Phone Fax Number : (786)513-7810

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 CALDERAB SERVICE LLC

Certificate of Status	0
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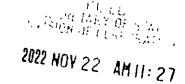
Electronic Filing Menu

Corporate Filing Menu

Help

(((H220C0396258 3)))

ARTICLES OF AMENUMENT TO ARTICLES OF ORGANIZATION OF



From: Paloma Duart

CALDERAB SERVICE LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records. Limited Liability Company))
The Articles of Organization for this Limited Liability C Florida document number L22000393616	Company were filed on 9/8/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	rida
 -	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

Page: 4 of 5

If amending Authorized Person(s) authorized to manuagepasses 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	
AMBR	ISAAC JOSE CALDERA BARRAGAN	1730 NE 170 ST	₩ Add	
		North Miami Beach FL 33162	☐ Remove	
			☐ Remove	
			Change	
			□ Remove	
			☐ Change	
				
			C Remove	
			Change	
				
			□ Remove	
			☐ Change	
			Add	
		·	□ Remove	
			Change	

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	10/20/2022	
lf an offe <u>Note:</u>	ve date, if other than the date of filing:	nt to 605.0207 (3 (b) t be listed as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier of:
Dated_	NOVEMBER 14 2027	
		
	Signature of a member or authorized representative of a member	

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