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COVER LETTER

Div	ision of Corp	porations			
SUBJECT:	Puertas Bita				
SOBJECT	·	Name of Lim	ited Liability Company		
The englaced	1	16 (2)	to the en		
The enclosed	Afficies of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspor	ndence concerning this matter	to the following:		
		Joseph Davidow			
			Name of Person		
		Willis & Davidow, LLC			
			Firm/Company		
		9015 Strada Stell Ct., Unit	106		
			Address		
		Naples, FL 34109			
			City/State and Zip Code		
		jdavidow@willisdavidow.co	om		
		E-mail address: (t	o be used for future annual r	eport notification	
For further in	formation co	ncerning this matter, please ca	all:		
Joseph David	dow		at () 465	-0531	
	Name of	Person	Area Code	Daytime Telepl	none Number
Enclosed is a	check for the	following amount:			
■ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

Street Address: 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

2022 OCT 31 PH 1:16

Puertas Bitar, LLC

(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on ited Liability Company)	our records.)	A Compression
The Articles of Organization for this Limited Liability Comp. Florida document number	pany were filed on 9/19/20)22	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the design	nation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES:	<u> </u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			-
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our recor	ds, <u>enter the n</u> a	me of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida si	treet 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR Bed	Bedoya Puertas, Dania	732 Woodshire Ln.	□ Add
		Apt. 11	□Remove
		Naples, FL 34105	■ Change
MGR Bitar, Bassam	Bitar, Bassam	732 Woodshire Ln.	
	Apt. II	_	
		Naples, FL 34105	=0
			□ Add
			□Remove
			Change
		_	□Add
		Remove	
			□Change
			□Add
		Remove	
		□Change	
		□Add	
		□Remove	
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _____ _ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated October 25 2022 Signature of a member or authorized representative of a member Dania Bedoya Puertas Typed or printed name of signee

Filing Fee: \$25.00