To:

Fax: (850) 617-6383

Page: 1 of \$

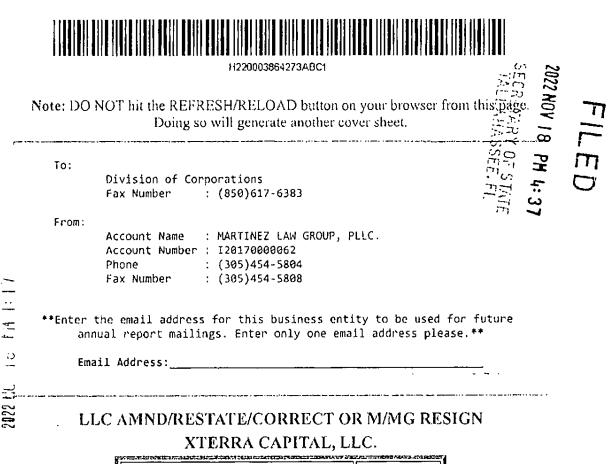
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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Electronic Filing Menu Corporate Filing Menu

Help

## H 22 000 386417 3 COVER LETTER

| TO: Registration Se<br>Division of Cor | ection .<br>Thorations                    | `   |  |
|--|---|---|--|
|  | CAPITAL, LLC.                             |   |  |
| SUBJECT:                               | Name of Lim                               | uted Liability Company  | ·  |
| The enclosed Articles of               | Amendment and fee(s) are sub              | unitted for filing.   |  |
| lease return all correspo              | indence concerning this matter            | to the following:   |  |
|  | JEISSA MARTINEZ                           |   |  |
|  |   | Name of Person  |  |
|  | MARTINEZ LAW GROU                         | JP, PLLC.   |  |
|  |   | FinivCompany  | · <del>··········</del>  |
|  | 1999 S.W. 27th Avenue, 1                  | st Floor  |  |
|  |   | Address   |  |
|  | Miami, Florida 33145                      |   |  |
|  |   | City/State and Zip Code   | <del></del>  |
|  | JM@MARTINEZLAWG.C                         |   |  |
|  |   | to be used for future annual report notifi                          | cation)  |
| For further information c              | oncerning this matter, please c           | all:  |  |
| JEISSA MARTINEZ                        |   | 305 454-5576  |  |
| Name o                                 | f Person                                  | Area Code Daytine   | Telephone Number   |
| Enclosed is a check for the            | he following amount:                      |   |  |
| 屬 \$25.00 Filing Fee                   | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | [3] \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address                        |   | Street Address  |  |

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

11/18/2022 12:01 PM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| XTERRA CAPITAL, LLC.                                    |   |                            |                                  |               |
|---|---|----------------------------|----------------------------------|---------------|
| (Name of the Limite                                     | d Liability Company as                              | it now appears on our reco | ords.)                           |               |
| (   | A Florida Limited Liabiii                           | ty Company)                |                                  |               |
|   |   | 10/11/2022                 | Sand Fign                        | امرات.        |
| The Articles of Organization for this Limited Lia       | ibility Company were                                | filed on                   |                                  | 100           |
| Florida document number L22000438447                    |   |                            |                                  |               |
| Torida docurrent number                                 |   |                            | % <u> </u>                       | -             |
| This amendment is submitted to amend the follo-         | wing:   |                            | PH<br>SEE                        | $\Pi$         |
|   |   |                            | PM 4:37<br>OF STATE<br>SEE, FL   |               |
| A. If amending name, enter the new name of              | the limited liability                               | company here:              | 고달 등                             |               |
| ·   |   |                            | · 🚎 😀                            |               |
| 9   | 1.081.11.11.11.11.11.11                             |                            | · -                              | 1 11          |
| The new name must be distinguishable and contain the we | ords "Limited Liability C                           | ompany, the designation L  | LC of the appreviation Erro      | ••            |
| Enter new principal offices address, if applica         | ahla:   |                            |                                  |               |
| •   |   |                            |                                  |               |
| (Principal office address MUST BE A STREE)              | <u>TADDRESS)                                   </u> |                            |                                  | <del></del> . |
|   |   |                            | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |               |
|   | <del></del> -                                       |                            |                                  |               |
|   |   |                            |                                  |               |
| Enter new mailing address, if applicable:               | 1 <del>7 i</del>                                    | ···                        |                                  |               |
| (Mailing address MAY BE A POST OFFICE I                 | ROX)  |                            | 19170                            |               |
| (S) uning unuress MAT BE AT UST OTTTEET                 | <u></u>   |                            |                                  | <u> </u>      |
|   | · —   |                            |                                  | <del></del>   |
|   |   |                            | •                                |               |
| B. If amending the registered agent and/or re           | egistered office addi                               | ess on our records, ent    | er the name of the new r         | egistere      |
| agent and/or the new registered office addres           | s here:   |                            |                                  |               |
|   |   |                            |                                  |               |
|   |   |                            |                                  |               |
| Name of New Registered Agent:                           |   |                            |                                  |               |
|   |   |                            |                                  |               |
| New Registered Office Address:                          |   | Enter Florida street adi   | lress                            |               |
|   |   | Daller 1 to the Sir cer in |                                  |               |
|   |   |                            | 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 Changing Registered Agent, Signature of New Registered Agent

Fax: 13056762427

To:

□Change

Page: 4 of 5

H2200038 64273
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         | Carlos Valera |                       |           |
|-------------|---------------|-----------------------|-----------|
|             |               | 5926 N.W. 113th Place | \_\Add    |
|             |               | Doral, Florida 33178  | CIRemove  |
|             |               | ·····                 |           |
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Ta:

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| Elec                      | tronic Atticles of Organization for Florida Limited Liability Company filed on October 11th, 2022,                        |
|---------------------------|---|
| is re                     | noved.  |
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| n effectiv<br>ite:   [f t | date, if other than the date of filing:   |
| ecord sp<br>is filed.     | secities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| ted                       | November 7th 2022   |
|                           | $\mathscr{O}$   |
|                           | Signature of a member or authorized representative of a member  |

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Filing Fee: \$25.00