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(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Se Division of Cor			
2GETHER SUBJECT:	LIGHTING, LLC		
30/Mile 11	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	FRANK R. SARIOL		
		Name of Person	
	SARIOL BUSINESS GRO	OUP, LLC	
		Firm/Company	
	8200 NW 41ST STREET.	SUITE 315	
		Address	
	DORAL, FLORIDA 3316	6	
		City/State and Zip Code	
	legal@bigpllc.com	to be used for future annual report notifi	ication)
For further information co	oncerning this matter, please of		
OSCAR G. BETANCOL	ЛТ	786 636-8649	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000449728	were filed on 10/19/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	tity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	14 NE 18T AVE SUITE 513	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33132	
Enter new mailing address, if applicable:	14 NE 1ST AVE SUITE 513	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33132	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	the name of the n SECRETAR TALLAH
New Registered Office Address:	Enter Florida street address	SSE SE
	, Florida	Zip Gward 5
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

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>	Address	Type of Action
MGR	Morales Gonzalez Luis Ernesto	14 NE 1ST AVE SUITE 513	= Add
		MIAMI, FL, 33132	Remove
			☐ Change
			Add
			Remove
			☐ Change
		-1000 <u>-</u>	□ Remove
			□ Change
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ective date, if other that effective date is listed, the da	the date of fili	ng:	to data of filing or mo	(opti	onal)
e: If the date inserted in the	his block does not	t meet the applica	able statutory filing	requirements, thi	s date will not be listed
iment's effective date on (ле (дерактенго)	state's records.			
record specifies a del			an effective ti	me, at 12:01	a.m. on the earlier
ne 90th day after the	record is filed:	d. • • • • • • • • • • • • • • • • • • •	V		
OCTOBER 26		2022	\bigvee		
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Filing Fee: \$25.00