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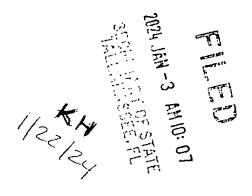
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COVER LETTER

DIVERSIT	AS TECHNOLOGY LLC				
Name of Limited Liability Company					
I Articles of	Amendment and fee(s) are sub	omitted for filing.			
	Andrea Vanina Yablansce	k			
	<u> </u>	Name of Person			
	Diversitas Technology LL	С			
	1465 NE 121st ST B412				
	North Miami Beach / FL /	33161			
City/State and Zip Code					
	-	to be used for future annual report notifical	tion)		
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	of Articles of all corresponds Name of the check for the	Andrea Vanina Yablansce Diversitas Technology LL 1465 NE 121st ST B412 North Miami Beach / F1. / blestadvisors@gmail.com E-mail address: (information concerning this matter, please costs Name of Person check for the following amount: filing Fee	Name of Limited Liability Company I Articles of Amendment and fee(s) are submitted for filing. I all correspondence concerning this matter to the following: Andrea Vanina Yablanscek Name of Person Diversitas Technology LLC Firm/Company 1465 NE 121st ST B412 Address North Miami Beach / FL / 33161 City/State and Zip Code blestadvisors@gmail.com E-mail address: (to be used for future annual report notifical and concerning this matter, please call: Diversitas Technology LLC Address North Miami Beach / FL / 33161 City/State and Zip Code blestadvisors@gmail.com E-mail address: (to be used for future annual report notifical and concerning this matter, please call: On the following amount: Check for the following amount:	Name of Limited Liability Company If Articles of Amendment and fee(s) are submitted for filing. Andrea Vanina Yablanseek Name of Person	Name of Limited Liability Company I Articles of Amendment and fee(s) are submitted for filing. I all correspondence concerning this matter to the following: Andrea Vanina Yablanseek Name of Person Diversitas Technology LLC Firm/Company 1465 NE 121st ST B412 Address North Miami Beach / FL / 33161 City/State and Zip Code blestadvisors@gmail.com E-mail address: tto be used for future annual report notification) Information concerning this matter, please call: OS Name of Person Name of Person Name of Person Og On The Person Certificate of Status Certificate of Status Certificate of Status Certificate of Status

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

DIVERSITAS TECHNOLOGY LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our order Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	y Company were filed on 10/28/2022	and assigned
Florida document number 1.22000464924	·	
This amendment is submitted to amend the following	;:	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "l	Limited 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 AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2024 TH
B. If amending the registered agent and/or registe agent and/or the new registered office address her		enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street d	address
		Florida 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

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	Mariana Sabina Alastuey	1465 NE 121st ST B412, North Miami Beac	h, FL 3316 □Add
			■Remove
			□Change
MGR	Andrea Vanina Yablanscek	1465 NE 121st ST B412, North Miami Beac	h, FL, 331t ■Add
			Remove
			□ Change
			□Add
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Filing Fee: \$25.00

Typed or printed name of signee