

L22000479309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

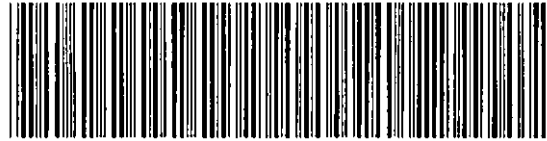
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DATE: 01/12/23

NAME: ROCHESTER INVESTMENTS USA LLC

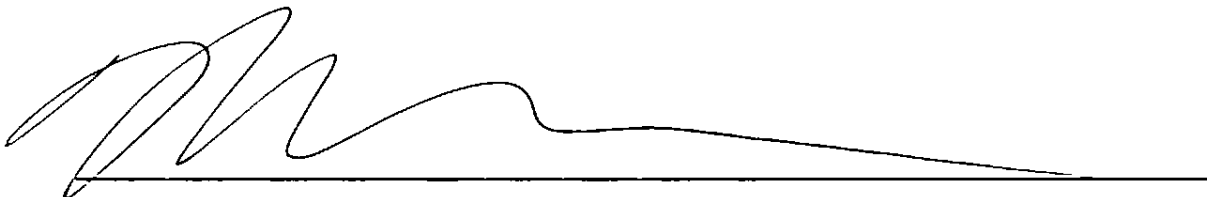
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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Rochester Investments USA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SEC. TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on November 8, 2022 and assigned
Florida document number L22000479309.

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 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street 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 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>	<u>Type of Action</u>
MGR	JUAN PABLO ALJURE	2598 E SUNRISE BLVD, SUITE 2104	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ILIANA ALJURE	7390 NW 4th STREET, APT 203	<input type="checkbox"/> Add
		PLANTATION, FL 33317	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	JUAN FELIPE ALJURE	2598 E SUNRISE BLVD, SUITE 2104	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33304	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	PATRICIA ALJURE	AUTOPISTA NORTE KM 15, VEREDA FUSCA	<input type="checkbox"/> Add
		CHIA CUNDINAMARCA 250008	<input type="checkbox"/> Remove
		COLOMBIA	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated 1/10/2023


Signature of a member or authorized representative of a member

JUAN PABLO AVURE
Typed or printed name of signee

Filing Fee: \$25.00