22/11/22, 11:08

Nov 22, 2022 11:11 (UTG-03)

Division of Corporations

Florida Department of State Division of Corporation

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(((H22000397339 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : PETER MATHISON LLC

Account Number : 120210000152 Phone : (305)520-9343 Fax Number : (786)705-2040

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANT AMERICA INGENIERIA AAI LLC

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COVER LETTER

	tration Section of Corp			•		
CHDIECT.		ANT AMERICA	INGENIERIA AALLLC			
SUBJECT: _		Name of Lim	ited Liability Company			
The enclosed A	Articles of A	amendment and fee(s) are sub	mitted for filing.			
Please return a	ll correspon	dence concerning this matter	to the following:			
		FF	RNANDO VILLARREAL			
			Name of Person			
	PETER MATHISON LLC					
	Firm/Company					
	800 SE 4TH AVENUE, SUITE 139					
			Address			
		HALL	ANDALE BEACH, FL 330	009		
		-	City/State and Zip Code			
			TUCONTADORENMIAMI to be used for future annual rep			
For further infi	ormation co	ncerning this matter, please of		, , , , , , , , , , , , , , , , , , ,		
		ILLARREAL	305 at ()	520-9343		
	Name of	Person		Daytime Telephone Number		
Enclosed is a c	theck for the	e following amount:				
■ \$25.00 Fil	ing Fce	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regi Divi P.O.	ng Address stration S sion of Co Box 6322 ahassee, F	ection orporations 7	Division of The Central N. M.	ress: on Section of Corporations re of Tallahassee Monroe Street, Suite 810 ec, FL 32303		

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANT AMERICA INGENIER	RIA AALLIC TAGE 22
(Name of the Limited Liability Company as it r (A Florida Limited Liability Company)	y Company) $=$ -4 $=$ \sim \sim
The Articles of Organization for this Limited Liability Company were fit Florida document number L22000491212 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability contains the submitted liability l	STATE
The new name must be distinguishable and contain the words "Limited Liability Comp Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	mpany," the designation "LLC" or the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	ss on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
(,iù	tty 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>	Address	Type of Action
MGR	BAEZA SALGADO, XIMENA A	800 SE 4TH AVENUE, SUITE 139	≣ Add
		HALLANDALE BEACH, FL 33009	□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			LIRemove
			□Add
			□ Remove
			Change
			□Add
			Remove
			□Add
			Remove

Nov 22, 2022 11:11 (UTC-Q3)

Note: If	e date, if other than the date of filing:
e record s rd is filed	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
Dated	22ND DAY OF NOVEMBER 2022
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00