11/3/23, 11:13 AM

Division of Corporations

220 Planica Department of Strate 907 Division of Corporations Electronic Filing Cover Short

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.

(((H23000382764 3)))



H230003827643ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTADORMIAMI.COM INC

Account Number : I20200000130 Phone : (954)345-7888 Fax Number : (786)713-1940

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 GODESSI LLC



Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

 To: CORPORATE AMENDMENT

Page: 3 of 5 2023-11-03 15:16:24 GMT 17867131940

From: TAXLEAF.COM INC CONTADORAMERICA.COM

H23000382764 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GODESSI LI			
(Name of the Limited Liability Company (A Florida Limited Liab	ns it now appears on our records.) thty Company)	·	
The Articles of Organization for this Limited Liability Company we Florida document number $\frac{1.22000527907}{1.000000000000000000000000000000000000$	ere filed on 12/16/2022	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	y company here:	1-2	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or t	he abbreviation "L,L,C."	
Enter new principal offices address, if applicable:		1	
(Principal office address MUST BE A STREET ADDRESS)		-	
-			
		 4	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or registered office add	ress on our records, enter the	name of the new registe	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florida	Zip Code	
	. Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree			

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

H23000382764 3

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
MBR	ADRIANA S VALEIKA	12900 AUTOMOBILE BLVD. SUITE K & L	□Add
		CLEARWATER, Ft. 33762	≡Remove
			∐Change
MBR	CAROLINA GNARRA RUSSO	12900 AUTOMOBILE BLVD, SUITE K & I.	🗏 Add
		CLEARWATER, FL 33762	🗆 Remove
			□Change
			🗀 Add
			□Remove
			Change
			ÜAdd
			□Remove
			(] Add
			∐Remove
			□Change
			🗆 Add
			Remove
			□Change

n amending any other into	rmation, enter change(s) here: (Attach additional sheets, if	necessary.y
		····
		
Note: If the date inserted in the	the date of filing: (emust be specific and cannot be prior to date of filing or more than 90 days its block does not meet the applicable statutory filing requirement the Department of State's records.	(optional) s after filing.)Pursuantto605.0207 s, this date will not be listed as
record specifies a delayed eft d is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
NOVEMBER IST	2023	
Dated		
	W.	
	Signature of a member or authorized representative of a member	
	CAROLINA GNARRA RUSSO	
	Typed or printed name of signee	