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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CG TAX, INC. Account Number : I19990000017

Phone

: (305)485-9300

Fax Number

: (305)485-1098

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FUTURE SEA, LLC.

	CONTRACTOR ASSESSMENT
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ARTICLES OF AMENDMENT TO: ARTICLES OF ORGANIZATION **OF**

FUTURE SEA, LLC.					
(Name of the Limite	ed Liability Compa (A Florida Limited !	ny as it now appears o Liability Company)	n our records.)		
The Articles of Organization for this Limited Lia Florida document number <u>L22000530205</u>	ability Company 	were filed on 01/01.	/2023	and assigned	
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the Hmited liab	ility company here	;		
N/A					
The new pame must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the desi-	gnation "LLC" or the a	bbreviation "L.L C."	,
Enter new principal offices address, if applica	able:	N/A			
(Principal office address MUST BE A STREE	T ADDRESS)				
			_ _ _	2023	_
Enter new mailing address, if applicable:		<u>N/A</u>		. w	_
(Mailing address MAY BE A POST OFFICE BOX)				2 [
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office ss here:	address on our rec	ords, <u>enter the na</u>	ne of the flew regi	istered /
Name of New Registered Agent:	N/A				_
New Registered Office Address:		Enter Florid	a street address		<u>stered</u>
			_, Florida _		_
		City		Zip Code	
New Registered Agent's Signature, if changing	Registered Agent	<u>1</u>			
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	ed agent and ag per and complet istered agent as registered offic	ree to act in this ca e performance of n provided for in Ch	apter 605, F.S. O	r, if this documen	
	<u> </u>	anging Registered Age	nt, Signature of New I	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	ROJAS CERON LADY VIVIANA	1151 NW 78TH AVE	
		PLANTATION, FL 33322	■Remove
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			□Add
			□Remove
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r	ive data if other than the date of filing:
	(optional) fective date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
	of 12:03 a m on the earlier of (h). The 90th day after the
eco is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eatlier of: (b) The 90th day after the filed.
	JANUARY 09 2023
itec	1
	CARLOS LENIS - UPUX PENCO
	Signature of a member of mulionized representative of a member

Typed or printed name of signee