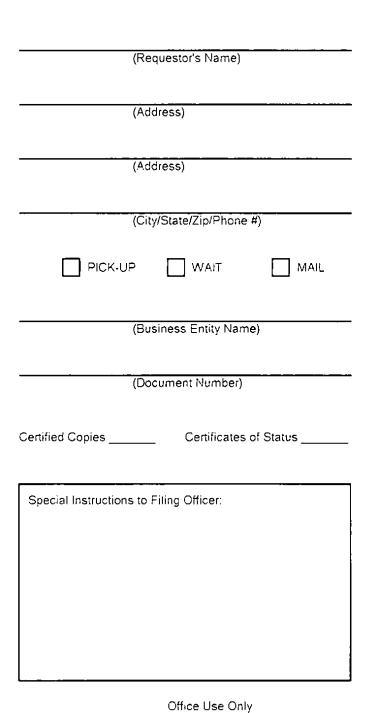
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COVER LETTER

TO:

	Registration Sec Division of Corp				
		STORE LLC			
SUBJEC	Т:	Name of Lim	ited Liability Company		
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspor	ndence concerning this matter	to the following:		
		ELIWAR DECARVALHO	0		
			Name of Person	_	
		ERC CONSULTING INC			
		**************************************	Firm/Company		
4701 N FEDERAL HWY SUITE 470					
			Address	-	
	POMPANO BEACH FL 33064				
			City/State and Zip Code	- :::	
		E-mail address: (to be used for future annual report notification)		
For further	er information co	ncerning this matter, please ca	all:	:	
			at ()		
	Name of	Person	Area Code Daytime Telephone Number	er (2)	
Enclosed	is a check for the	e following amount:			
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	ate of Status &	
]	Mailing Address Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810	

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Compar	iv as it now appears on o	ur records.)	·
·	(A Florida Limited L	iability Company)	, , , , , , , , , , , , , , , , , , ,	
The Articles of Organization for this Limited L	iability Company	were filed on $01/$	12/2023	and assigned
Florida document number <u>L 230000264</u>	<u>83</u>			
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liabi	lity company here:		
The new name must be distinguishable and contain the v	words "Limited Liabili	ty Company," the designa	tion "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	rable:	8415 HARD	NG AVE	
(Principal office address MUST BE A STREE	ET ADDRESS)	APT 9		
		MIAMI BEACH	fl, 3314	1
				-3
Enter new mailing address, if applicable:		8415 HARTAN	s Ave	سر <u>م</u>
(Mailing address MAY BE A POST OFFICE	BOX)	APT 9	-	:
		MIAMI BEACH	FL 3314	1^
				<u>1</u>
B. If amending the registered agent and/or i		ddress on our record	s, <u>enter the na</u>	
agent and/or the new registered office addre	ss here:			S S
Name of New Registered Agent:	DOROTEIA	ALVES DA CO	ATZ	
New Registered Office Address:	8415 HAR	DING AVE ,	APT 9	
		Enter Florida sti	eet address	
	MIAMI BE		, Florida _	33141
		City		Zip Code

DACOSTA

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
AMBE	DOROTE'N ALVESDA COSTA	8415 HARDING AVE	□Add
		APT 9	□Remove
		MIAMI BEACH FL 33141 US	
<u>ambr</u>	DEBORA C BASTOS ROMERO	6930 RUE VERSAILLES	□Add
		APT 27	T Remove
		MIAMI BEACA, FL 33141 US	□Change
			□Add
			-7 Remove
			∴ ☐Change
			Add
			∷ @Remove
			[] Change
			🗆 Add
			□Remove
			□Change
			□Add
		-	[]Remove
			□Change

			
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ffective dat	e, if other than the date of filing: _	not be prior to date of filing or more than 90 da	_ (optional)
		mot be prior to date of filing or more than 90 di t the applicable statutory filing requireme	
	fective date on the Department of State		
record speci	les a delayed effective date, but not an	effective time, at 12:01 a.m. on the earlie	er of: (b) The 90th day after the
l is filed.	•		•
			<u>-</u> ,
ated	JUNE 2	2023	س . غ
	\mathcal{L}		<u>.</u>
	Signature of a men	nber or authorized representative of a member	
	· ·		ç.

Typed or printed name of signee