## Florida Department

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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Fax Number

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

Fma11	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA INTERNATIONAL INVESTMENT 3 LLC

Certificate of Status	0
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AUG 0 5 2023



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA INTERNATIONAL IN	VESTMENT 3 LL	.c		
(Name of the Limi	ted Liability Comps (A Florida Limited	any as it now numers on our records.) Liability Company)		
The Articles of Organization for this Limited L	iability Company	were filed on 01/17/2023	and assigned	
Florida document number L23000030959	<del></del> ,			
This amendment is submitted to amend the foll	owing			
A. If amending name, enter the new name o	f the limited liab	dlity company here:		
The new name must be distinguishable and contain the	ords "Limited Liabi	lity 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)		1900 W 54th STREET		
		# 419		
		HIALEAH, FL 33012		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		# 419 HIALEAH, FL 33012		
B. If amending the registered agent and/or ragent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:	CHANGE OF A	ADDRESS TREET # 419 Enter Florida street address	2023 AUG - L PI	
	HIALEAH	, Florida <sup>3</sup>	1301 <u>2</u> 12.5	
New Registered Agent's Signature, if changing I	tegistered Agent:		0	

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

From: Yanet

## 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

Title	Name	Address	Type of Action
MGR	SERGIO SERNA	10761 NW 52 ST	□Ađd
		DORAL, FL 33178	■Remove
			Change
AMBR	NASHUA PEREZ SALAH	1900 W 54th STREET	□Aċd
		# 419	□Remove
		HIALEAH, FL 33012	
AMBR	NICOLAS PEREZ	1906 W 54th STREET	_
		# 419	Remove
		HIALEAH, FL 33012	Change
			□Retnove
			Change
	***************************************		□Add
			□ Remove
			☐ Change
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			□Remove
			∏Change

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ument's effective date on the Department of State's records.	Pursuant to 605.02 vill not be listed
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	90th day after th
filed.	
8 4 2023.	
ed 017 17020	
Signature of a member or authorized representative of a member	