23000076812

(Requestor's Name)
(Address)
(Address)
(1831030)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Octanica copies
Special Instructions to Filing Officer:

Office Use Only



700403533217

p://b.ii-611.i-622 **Li.ui

5/15/23 V:LA

2023 HAR 28 AM 10: 21

COVER LETTER

TO:	Registration Se Division of Cos			·	
SUBJEC	Euros Indu	istries LLC			
SUDJEA	L. I :	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub			
		Fabrizio L.			
			Name of Person		_
		ZenBusiness INC.			
			Firm/Company		
		336 F. College Ave., Ste 30	ıI.		
			Address		_
		Tallahussee, FL 32301			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	_
		fulfillment@zenbusiness.co	on to be used for future annual re		
				port notification)	
For furti	ier information c	concerning this matter, please c	aH:		
Fabrizio C/O ZenBusiness INC.			7349		
	Name (of Person	Area Code	Daytime Telephone Numb	er
Enclose	d is a check for t	he following amount:			
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclo	sedi Certifie	Filing Fee, cate of Status & cd Copy all copy is enclosed)
	Mailing Addre	88:	Street Add	Iress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Euros Industries LLC				
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our record naed Liability Company)	<u>N.</u>)		
The Articles of Organization for this Limited Liability ComFlorida document number $\frac{1.23000075812}{}$.	pany were filed on <u>02/10/2023</u>	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	l liability company here:			
Eurus Industries LLC				
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u> </u>	77 EG 87 HA		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		R 28 AN IO 21		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter</u>	the name of the new registere		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street addres			
	Enter v torida siveet address			
4		orida		
	Cuv	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 Changing Registered Agent, Signature of New 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	Membe	

<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
			□Add
			🗀 Remove
			□Change
			🗆 Add
		-1111	□Remove
			Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change

Page 2 of 3

				,	_
···					_
				1 20 2	_
	<u> </u>				
<u>-</u>					_
					_
					_
				•	_
					_
					_
					_
					_
					-
				<u> </u>	
Effective date, if other that (If an effective date is listed, the da Note: If the date inserted in t document's effective date on	his block does not ma	eet the applicable sta	if liling or more than 90 c tutory filing requirem	_ (optional) lays after filing.) Pursuant to (ents, this date will not be l	905.0207 (3)(isted as the
the record specifies a del) The 90th day after the		ate, but not an e	ffective time, at 1	2:01 a.m. on the ear	lier of:
Dated		2023			
	/s/ Sebast	ian Camilo Mo	oreno Ardila		
	Sianatura at a m	ember or authorized re	presentative of a membe		
	Menatare of a m	emier vi administrate	inesemmine of a memore		

Page 3 of 3

Filing Fee: \$25.00