(Requestor's Name) (Address)	
(Address)	900414191789
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
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FILE 2ND

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

> ACCOUNT NO. : I2000000195 REFERENCE : 956311 8153922 AUTHORIZATION :

COST LIMIT : \$ 25.00

- ORDER DATE : August 24, 2023
- ORDER TIME : 11:21 AM
- ORDER NO. : 956311-010
- CUSTOMER NO: 8153922

DOMESTIC AMENDMENT FILING

NAME: NEARSHORE GROWTH TECHNOLOGIES US, LLC

EFFECTIVE DATE:

ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

<u>CERTIFIED COPY</u> <u>XX</u> PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS:

TO: Registration Section Division of Corporations

SUBJECT: ______

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Federico Andres Avila Alas

Name of Person

Firm/Company

175 SW 7th Street, # 1614

Address

Miami, FL 33130

City/State and Zip Code

federico.avila@valoremcp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Federico Andres Avila Alas
 305
 812-8042

 Name of Person
 Area Code
 Daytime Telephone Number

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E138 (2/14)

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1). Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: _____

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SECOND: The Florida Document Number of the limited liability company is:

THIRD: The street address of the limited liability company's principal office is:

175 SW 7th Street, # 1614

Miami, FL 33130

The mailing address of the limited liability company's principal office is:

175 SW 7th Street, #1614

Miami, FL 33130

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company,

Federico Andres Avila Alas Granted to: _ a.

b. No authority granted to:

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company,

Granted to : _____ a.

No authority granted to: _____ b.

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Signature At autoorized representative	
Signature and Signature in the semiative	I

Federico Andres Avila Alas

Typed or printed name of signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)