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Y. SCOTT MAY 1 3 2023

COVER LETTER

TO: Registration Division of	n Section 💮 🚜 Corporations	* 4	** * <u>*</u>		المثار المغوي
SUBJECT:	Property's	Book	h 11 C		
30DJEC &	Name of	f Limited Liability C	ompany		
The enclosed Articles	s of Amendment and fee(s) are	submitted for filin	ng.		
Please return all corre	espondence concerning this ma	atter to the followi	ng:		
		da ana	Gome Z f Person		2
		Firm/Co	ompany.	55000 550000 5500000000000000000000000	1- 1 t
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	90Mez E-mail addre	73000 Cess: (to be used for fi	m · Com uture annual report not	ification)	
For further information	on concerning this matter, plea	ase call:			
Adrica Nar	ne of Person	at (<u> </u>	Slo 1) lo 70 na Code Daytin	- 0570 ne Telephone Number	
Enclosed is a check f	or the following amount:				
♥ \$25.00 Filing Fe	e □ \$30.00 Filing Fee & Certificate of Statu	is Certifi	Filing Fee & ed Copy nal copy is enclosed)	S60.00 Filing Certificate o Certified Co (additional cop	of Status &
<u>Mailing Ad</u> Registratio	dress: on Section		Street Address: Registration Se	ection	
Division of	of Corporations		Division of Co The Centre of	rporations	
P.O. Box	UJ41		THE COUNT OF	i alialiassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	Only as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000177885</u> .	y were filed on 3/9/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the abbre tion "L.L.C."
Enter new principal offices address, if applicable:	IALI I
Principal office address MUST BE A STREET ADDRESS)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	- SE
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
······	, Florida
	•

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 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	Adriana Gomez	4251 NE 13th AVE Pompano Ben, Fl. 33064	🗀 Add
			Remove
			Change
AMBR	Milton R. de Carvalho	4251 NE 13th AVE Pampano Boh, Fl 33064	□Add
			□Remove
			DChange
		ζη το στο στο στο στο στο στο στο στο στο	□Add ≌
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effective date: If the date	e, if other than the te is listed, the date mus ate inserted in this bl fective date on the De	at be specific and ock does not m	cannot be prior to leet the applicab	date of filing or me le statutory filing	ore than 90 days afte	ional) or filing.) Pursuant t is date will not be	to 605.01 e listed
ord specifi filed.	ies a delayed effectiv	e date, but not	an effective time	e, at 12:01 a.m. o	on the earlier of: (b) The 90th day	/ after ti
d	3/23	 ,	2023	. •			
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			nambar or authori	zed representative	of member		_