L23000157223

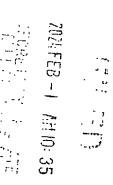
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COVER LETTER

TO: • Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

ECOGR SUBJECT:	ECOGREEN GENERATION COMPANY, LLC					
	Name of Lim	ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.				
	spondence concerning this matter	-				
	NOELIA FURNO					
		Name of Person				
		Firm/Company				
	1600 NE IST AVE APT 1	005				
	Address					
	20					
City/State and Zip Code neelia_furno@yahoo.com						
		to be ased for future annual report notification	207:FEB -1 AH 10: 35			
For further informatio	n concerning this matter, please c	ali;	no ga Line			
NOELIA FURNO		337 853-7814 at ()	型 5			
Nam	e of Person	at () Area Code Daytime Telep	hone Number (1)			
Enclosed is a check fo	r the following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & E Certified Copy (additional copy is enclosed)	□ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Add Registratio	n Section	Street Address: Registration Section				
Division of	l'Corporations	 Division of Corporati 	10118			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECOGREEN GENERATION COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/28/2023}{1}$ and assigned Florida document number L23000157223 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sintra Events & Design, 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: 1600 NE 1ST AVE APT 1005 (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33132 Enter new mailing address, if applicable: 1600 NE 1ST AVE APT 1005 (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL,33132 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

1600 NE 1ST AVE APT 1005

City

MIAMI

Enter Florida street address

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n effective date is liste	ner than the date of the date must be spe rted in this block do date on the Departm	cific and cannot be prosent of the capp	for to date of filing of liling of filing of the statutory f	or more than 90 day	(optional) ys after filing. ts, this date	Pursuant to 605 will not be list	3.0207 ed as
ecord specifies a de is filed.	layed effective date.	but not an effectiv	e time, at 12:01 a.	m, on the earlier	of: (b) Th	e 90th day after	r the
January 24th		2024					
		ire of a member or a	U ywx!				

Filing Fee: \$25.00

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	<u>Name</u>	Address	Type of Action
AMBR	CARLOS MENDEZ-TAVOLARA	100 LINCOLN RD APT 729, MIAMI BEACH,FL	□Add
		33139	■Remove
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