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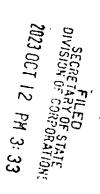
(Requestor's Name)
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Y. SCOTT OCT 2 2 2023

COVER LETTER

TO: Registration So Division of Cor			•	4
	TO SUBITO LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Marina Hawes			
		Name of Person		
	Bryn Law Group			01V 20
		Firm/Company		23 0
	One Biscayne Tower, Suit	te 2600, 2 South Biscayne Blvd.		SECRETARY DIVISION OF CO 2023 OCT 12
		Address		2 F
	Miami, FL 33131			SECRETARY OF STATE OF STATE OF CORPORATE OF
		City/State and Zip Code		3: 33
	marina@brynlaw.com			
For further information of	E-mail address: (oncerning this matter, please c	to be used for future annual report not	fication)	
	oncerning this matter, piease c	att.		
Marina Flawes		305 374-0501 at ()		
Name o	f Person		e Telephone Number	_
Enclosed is a check for the	ne following amount:			
■ \$25,00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing land Certificate of Certified Copy (additional copy)	Status & y
Mailing Addres Registration S		Street Address: Registration Se	ction	
Division of C		Division of Cor		
P.O. Box 632	27	The Centre of T	allahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PACCHETTO SUBITO 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 $\frac{04.06(2023)}{2023}$ and assigned Florida document number 1.23000160315 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Condotto Andino, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent:

New Registered Agent's Signature, if changing 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.

Enter Florida street address

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>	<u>Address</u>	Type of Action
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			□Remove
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ective date, if other than the dat reffective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Depar	does not meet the applicable st	of filing or more than 90 days at atutory filing requirements, t	tional) ler filing.) Pursuant to 605,0207 his date will not be listed as
cord specifies a delayed effective da s filed.	te, but not an effective time, at	12:01 a.m. on the earlier of:	(b) The 90th day after the
	2023		
ted September 20	··		

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