L23000278077

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)
PICK-UP WAIT	MAIL
(Business Entity Name)
(2000)	,
(Document Number)	
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Certified Copies Certificates of	- Status
	- -
Special Instructions to Filing Officer:	
	





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2002 DED 11. DW 2-2



COVER LETTER

SUBJECT: BEHASI LLC SUBJECT: The analoged Articles of Amendment and	Name of Limited Liability Company If fee(s) are submitted for filing.
The enclosed Articles of Amendment and	I fee(s) are submitted for filing.
THE CHEIOSCH MITTELES OF MITCHAINER AND	
Please return all correspondence concern	ing this matter to the following:
PILAR DIA	Z.
	Name of Person
AMERITIT	LE OF FLORIDA INC
	Firm/Company
20900 NE 3	0 AVENUE 8TH FLOOR
_ .	Address
AVENTUR	A. FLORIDA 33180
	City/State and Zip Code
	rida@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this r	natier, please call:
PILAR DIAZ	305 713-4154
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following am	ount:
☐ \$25.00 Filing Fee ☐ \$30.00 Fi	7 600 00 777
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

				
(Name of the Lim	(A Florida Limited)	iny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited I Florida document number 1.23000278077	Liability Company	were filed on <u>06/08/2023</u>		and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited li <u>ab</u>	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if appli	cable			
(Principal office address MUST BE A STREET ADDRESS)		1800 S OCEAN DRIVE UNIT 1502		
		HALLANDALE BEACH, FLORIDA 33009		
Enter new mailing address, if applicable:		1800 S. OCEAN CRIVE U	JNIT 1502	
Mailing address MAY BE A POST OFFICE	(ROX)	HALLANDALE BEACH, FLORIDA 33009		
3. If amending the registered agent and/or agent and/or the new registered office address.	ess here:	address on our records, <u>ei</u> OF FLORIDA INC	nter the name	of the new register
Name of New Registered Agent:				
New Registered Office Address:	20900 NE 30 A	VENUE STH FLOOR Enter Florida street ac	Idress	<u> </u>
	AVENTURA		, Florida ³³¹⁸	0 -
	· · · · · · · · · · · · · · · · · · ·	City	, F10110a	Zip- Go de .
New Registered Agent's Signature, if changing	Registered Agent:			ဘား - ယ္
hereby accept the appointment as registered provisions of all statutes relative to the propactions of the obligations of my position as regioning filed to merely reflect a change in the company has been notified in writing of this	oer and complete istered agent as p registered office	performance of my dutie. provided for in Chapter 6	s, and I am fai 05, F.S. Or, if	niliar with and this document is

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 Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CADEMARK S.A. DE C.V.	1800 S.OCEAN DRIVE UNIT 1502	∃ Add
		HALLANDALE BEACH, FL 33009	□Remove
			□Change
MGR	YEDID, SOLLY		□Add
			≅Remove
			□Change
MGR	SACAL DE YEDID, KAREN		□Add
			■Remove
			□Change
			□Add
			□Remove
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an effec <u>fote:</u> I	ce date, if other than the date of filing:
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record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
record Lis file	d.

Filing Fee: \$25.00