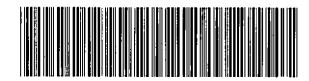
L23000331358

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2028 AUG 29 At 7: 30



COVER LETTER

TO:

ГО:	-Registration Sect Division of Corpo			, , ,	
		A GROUP LLC			
SUBJI	SCT:	Name of Lim	ited Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return all correspond	dence concerning this matter	to the following:		
			LEON BALZA		
			Name of Person		
		L &	N GENERAL FILING SERVICES	3	
			Firm/Company		
		378	35 NW 82ND AVE STE 209		
			Address		
			DORAL FL 33166		
			City/State and Zip Code		
			G@YAHOO.COM		
		E-mail address: (to be used for future annual report not	ification)	
For fur	ther information cor	ocerning this matter, please co	all:		
	LEON BALZA		786 235-0909 at ()		
	Name of I	erson	Area Code Daytim	ne Telephone Number	
Enclos	ed is a check for the	following amount:			
□ \$2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro	rporations		
			Tallahassee, FL 32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 AUG 29 AH 7: 36

	ANDANNA GROUP LLC	2020 AUG 29	AM 7:36
(Name of the Limit	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	1
The Articles of Organization for this Limited L		/12/2023	and assigned
Florida document number L23000331358			
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:		<u>-</u>	<u>-</u> -
Mailing address MAY BE A POST OFFICE	BOX)		<u>.</u>
B. If amending the registered agent and/or agent and/or the new registered office addre	• •	ecords, <u>enter the n</u>	ame of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
		, Florida	
	City		Zip Code

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 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
AMBR	AMBROSIO PLATA NAVAS	169 E FLAGLER ST	□Add
		STE 1439	■Remove
		MIAMUFL 33131	
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□ Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change

D. If amending any othe	r information, enter	r change(s) here:	(Attach additional s	sheets if necessary	J
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F - Effective date, if othe	r than the date of fil	ling:		(optional)	•
E. Effective date, if othe (If an effective date is listed, Note: If the date inserte document's effective da	ed in this block does no	of meet the applicab	date of filing or more the de statutory filing req	an 90 days after filing) urrements, this date	Pursuant to 605,0207 (3/K) will not be fisted as the
If the record specifies a dela- record is filed	yed effective date, but	not an effective time	: at 12:01 a.m. on the	e earlier of: (b) The	e 90th day after the
August 21 Dated		2023			
Dated	1. (1)	1 D 1			
	Jenature o	t Timember of authoriz	red representative		٠

Andres I. Hernandez Rocha. Exped or printed name of signife