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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAXLEAF.COM INC Account Number : I20140000084 Phone : (305)527-6617 Fax Number : (786)713-1940

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARZAMO LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

,	ARZAMO LLC			
(Name of the Limited 1	inbility Company as it forida Limited Liability	now appears on our re Company)	cords.)	
The Articles of Organization for this Limited Liabi	lity Company were fi	led on <u>07/20/2023</u>	·· <del>-</del> · · ·	and assigned
Florida document number 1.23000344670	·			
This amendment is submitted to amend the following	ng:			
A. If amending name, <u>enter the new name of th</u>	e limited liability co	mpany here:		
The new name must be distinguishable and contain the words	s "Limited Liability Com	pany," the designation	LLC" of the abl	previation "L.L.C."
Enter new principal offices address, if applicable	e:			
Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address h		on our records, <u>ei</u>	nter the name	e of the new regist
Name of New Registered Agent:	<u>cre</u> .		Ü	2023
		<u> </u>		
New Registered Office Address:		Enter Florida su cet a	ldress	· · · · · · · · · · · · · · · · · · ·
-	Cip		, Florida	
New Registered Agent's Signature, if changing Regi		r		N
hereby accept the appointment as registered a provisions of all statutes relative to the proper a		•		, ,

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

## H230CC256238 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	ARCE DEVOTO, IRMA GRACE YEYA	7200 N OCEAN BLVD	■Add
		MIAMI, TL 33156	
			LTChange
		Remove	
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). If amo	nding any other information, enter change(s) here: (Attach additional sheets, if necessary).)
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Note:	ve date, If other than the date of filing:  cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) (3) (1) (3) (4) (4) (5) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7
the record	I specifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	JULY 20TH 2023
	Signature of a member of authorized representative of a member
	LIV ACEVEDO  Typed or printed name of signee