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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT: <u>&RV</u>	icios y soluc	CONES BARNA	ШС
	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub idence concerning this matter	omitted for filing. to the following:	Servicios Y Soluciones Barng LLC
	Ewrigur	E CARALPS Name of Person	
		Firm/Company	
	9351 SW	2124 TERRACE	7:
	CUTTER B ECARA	Address SAY JFL 33\8 City/State and Zip Code LPS © GUALL, to be used for future annual report to	COM 26
For further information ec	oncerning this matter, please co	·	Amelianii) Amelianii Ameli
Ewigne C	Person	at (<u>786</u>) <u>729</u> Area Code Dayti	2177 me Telephone Number
Enclosed is a check for th	e following amount:		
\$\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration S Division of Co The Centre of	orporations Tallahassee
Tallahassee, I	1, 04014	2410 N. MOIII	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERVICIOS Y SOZUCIONES BARNA LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	(*) 1	1 1
The Articles of Organization for this Limited Liability Compar Florida document number <u>L 23 >>>351 823</u> .	iy were filed on	and assigned
Florida document number <u>L 23 5550</u> 825.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC"	or the abbreviation "L.L.C."
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)		
		-11 6:
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter tl</u>	he name of the new registere
agent and/of the new registered wince address nere.		. မှ မ
Name of New Registered Agent:		90
wante of tvew registered rigent.		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
Name Description of America Committees of all american Descriptions of American Descriptions of American Description of Americ	•	especone
New Registered Agent's Signature, if changing Registered Agen	<u>ı.</u>	

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 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>	Name	Address	Type of Action
MNG	Michel Martinez	7901 4ST N	□Add
	LLAVERO	ST-PETERSBURG	⊠ Remove
		33702 FL	□Change
MN6	LWA C. WILLIAMS ESTE	7901 48 N	XAdd
		ST PETERS BURG	□Remove
		33702 FL	□Change
			■ Add Control Contro
		· : : :	. GChange GAdd
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