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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CONTADORUSA INC.
Account Number : 120200000118
Phone : (305)260-6968
Fax Number : (786)513-7810

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMARA DEVELOPMENT LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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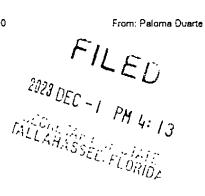
Corporate Filing Menu

Help

K. SALY

DEC - 4 2023

From: Paloma Duarte



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMARA DEVELOPMENT LLC		
Name of the Limited Liability Compar (A Florida Limited L	y as it now upnears on our reability Company)	cords.)
The Articles of Organization for this Limited Liability Company	were filed on 08/28/2023	and assigned
Florida document number L23000404299		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	y Company," the designation '	LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off	ice address on our rec	neds enter the name of the new
registered agent and/or the new registered office address here	;	enter the name of the pen
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street at	ldres:
		, Florida
New Registered Agent's Signature, if changing Registered Agent;	City	Zip Code
		**
I hereby accept the appointment as registered agent and agra- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties rovided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

To:

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

$MGR = M$ $AMBR = A$ $\underline{Title}$	lanager uthorized Member <u>Name</u>	Address	Type of Action
MGR	EVANDRO FASCINA	8050 DE HAVEN ST	
		ORLANDO, FL 32832	□ Remove
			□ Change
			□ Add
			D Removious DEC
			Remove
			Change
			О Ретоус
			☐ Change
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			□ Remove
			□ Change
			Add ☐ Remove
			☐ Change

From: Paloma Duarte

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l'an effectiv	e date is listed, the da	n the date of filing at must be specific and	cannot be prior t	o date of filing or m	ore than 90 days off	tional) er filing.) Pursuant	to 605.0207 (3)(b)
<u>Vote:</u> If the locument's	ne date inserted in a s effective date on	this block does not m the Department of S	neet the applica tate's records.	ble statutory filin	g requirements, th	ils date will not t	oe listed as the
e record The 90	i specifies a de th day after thi	layed effective d e record is filed.	ate, but not	an effective t	lme, at 12:01	a.m. on the	earlier of:
	,						
Dated NO	VEMBER 28	······································	2023	·			
	1						

Typed or printed name of signee