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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : IP ACCOUNTING GROUP & BUSINESS CONSULTANTS

Account Number : I20170000038 Phone : (305)324-2248

Fax Number : (305)324-4959

mail A	ddress:_	LPATANGROUP@GMAIL.COM	
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T. LEMIEUX

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PLOFINE 13 PH 12: 47
2024 PARP 13 PH 12: 47
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H. BHINSTER & ASSOCIATES, PA

Fino/Company

199 SW 12TH AVENUE, SHITE 4

Address

MIAMI, FL 33130

City/State and Zip Code

IPATA XCROHP@GMAIL.COM

E-mail address: (to be used for fature annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

™ \$25,00 Filing Fcc

☐ \$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 Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

- Mar. 18. 2024 11:00AM

IL Bunster & Associates. PA ARCHELES OF ANUENDMENT TO

No. 1216 P. 4

ARTICLES OF ORGANIZATION OF

TFO MIAMI				
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appear Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Compan	y were filed on	9/7/2023	and a	ssigned
Florida document number <u>L23000418319</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lin	bility company he	re:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the di	esignation "LLC" or 1	he 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)		<u></u>		
				<u> </u>
			2024 HA	
B. If amending the registered agent and/or registered office	address on our re	cords, enter the r	nanc of the no	w registered
agent and/or the new registered office address bere:			~ 4	
			그 유 표	
Name of New Registered Agent:		·····	<u>ිග ජ</u> වන්	
New Registered Office Address:			25 ƕE	ì
	Enter Flori	da Street address		 .
		, Florida		
· · · · · · · · · · · · · · · · · · ·	City		Zlp Code	_

New Registered Agent's Signature, if changing Registered Agent:

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 Mar. 13. 2024 11:00AM IL Bunster & Associates. PA No. 1216 F. 5 authorized to manage, enter the title, name, and address or 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	JORGE DE PAREJA LOPEZ	11170 SW 161st Pl	, □Add
		<u>Miami, Fl 33196</u>	<u> </u> ₩Remove
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		<u></u>	DAdd
			□Remove
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			∏Remove

The na	ne and addr	ess of person	ı(s) author	rized to ma	nage LLC sh	all read as foll	ows:
MGI	···· M· KEVIN	(P1ZZOLO	Located a		7 161st Pl. A	liami, Fl 3319	16
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fective date	if other thus	n the date of f	filina:	03/12/	2024	(options	al)
in effective da	c is listed, the da	te must be specifi-	e and cannot b	ie prior to date (if tiling or more th	an 90 days after fili	ng.) Pursuut to 605.0201
		his block does r the Department			lutory liting req	uirements, this di	ite will not be listed as
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is filed.	es a dem) ed er	techive diffe, our	I HOL SH CLIES	inve time, at	2.01 a.m. 60 m	carner or, (3)	The Join day after the
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