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Division of Corporations Fax Number : (850)617-6383

From:

Account Name	:	US CONTADOR INC
Account Number	:	120200000121
Phone	:	(770)928-2700
Fax Number	:	(888)772-8108

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

Email Address:\_



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To: SUNBIZ LLC		2024-07-16	15:30 50 GMT	18887728108	From: Mike Natarus
		H2400024082	28 3	F	11 ~
	ART		AMENDMENT O	2024	From: Mike Natarus LEL 5 AH 4: 08
	ARTI	CLES OF (	ORGANIZATION	TALLAHASSE	5 AH 4:00
		U	/r	ALLAHASE	υ <u>σ</u>
			M WORLD LLC		E.FLORID.
	(Name of the Limite	d Llability Compa A Florida Limited	any as it now appears on our re- Liability Company)	cords.)	
Th	e Articles of Organization for this Limited Lie	ibility Company	were filed on	and assi	gned
Flo	orida document number 123000462283	<u> </u>			
Th	is amendment is submitted to amend the follo	wing:			
A.	If amending name, enter the new name of	the limited liab	ollity company here:		
The Arti Florida o This am A. If an The new o Enter no (Princip) Enter no (Mailing) B. If an	e new name must be distinguishable and contain the wo	ords "Limited Lisbi	ility Company," the designation "	LLC" or the abbreviation "L.I	C."
Ea	iter new principal offices address, if applica	ble:	4855 W HILLSBORO BL	VD STE B3	
<u>(P</u>	rincipal office address MUST BE A STREET	ADDRESS)	COCONUT CREEK, FL 3	3073	
Er	tter new mailing address, if applicable:		4855 W HILLSBORO BLY	VD STE B3	
(M	lailing address MAY BE A POST OFFICE B	<u>10X1</u>	COCONUT CREEK, FL 3	3073	
				<del>_</del>	
в	If amending the projection depend and (as as				
8. 89	If amending the registered agent and/or re ent and/or the new registered office address	shere:	address on our records, <u>en</u>	tter the name of the new	reparred
	Name of New Registered Agent:	CONTADOR	RA LLC		
	New Registered Office Address:	4855 W HILLS	BORO BLVD STE B3		
			Enter Florida street ad		
			Cin	, Florida 33073 Zip 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 Changing Registered Agent, Signature of New Registered Agent

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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
MGR	TRUJILLO, CRISTIAN C	4855 W HILLSBORO BLVD STE I	33 🗆 Add
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			□ Change
MGR	REYES VARON, MARIA E	4855 W HILLSBORO BLVD STE I	33 ≅∧dd
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## D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this bi decument's effective date on the D	st be specific and cannot be prior ock does not meet the application	able statutory filing	(optional) e than 90 days after filing.) requirements, this date s	Pursuant to 605.0207 (3)(i will not be listed as the	b)
ne record specifies a delayed effectiv and is filed.	e date, but not an effective th	me, at 12:01 a.m. on	the carlier of: (b) The	: 90th day after the	
JULY 10TH	, 2024				
Cularia	Eusia Her.	1 bros			
MARIA E REYES VA	Signature of a member or putho	wized representative o	t a member		

20 //11/01/

Typed or printed name of signee

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