Det	14	2023	17:32	ΗP	Fax

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page 1 DMsion of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230004266703)))



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	To:					•
		Division of Corporations				
		Fax Number : (850)617-6383				
	From:					
		Account Name : FASTKIT CORP				
		Account Number : 120100000089				
		Phone : (305)599-0839 Fax Number : (305)592-9591				
		Lex uninet. 7 (202)225-2221				
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Electronic Filing Menu Corporate Filing Menu

Help ____

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

ADMINANT COOMMAN

The Articles of Organization for this Limited Liability Company	y were filed on 10-31-2023	and assigned
Florida document number		
This amendment is submitted to amend the following:		267~
A. If amending name, enter the new name of the limited lial	bility company here:	•
N/A		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if applicable:	511 N 70TH WAY	-
Principal office address MUST BE A STREET ADDRESS		
	HOLLYWOOD, FLORIDA 33024	ري
nter new malling address, if applicable:	511 N 70TH WAY	
Mailing address MAY BE A POST OFFICE BOX		
	HOLLYWOOD, FLORIDA 33024	

Name of New Registered Agent:		
New Registered Office Address:	511 N 70TH WAY STE.B	
	Enter Florid	da street address
	HOLLYWOOD	. Florida ³³⁰²⁴
	, Cîny	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.

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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	GABRIEL M SANTA ANA	10065 SW 213TH TERRACE	🖸 Add
		CUTLER BAY,, FL. 33189	ERemove
			□Change
			🗆 Add
			CRemove
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			ORemove
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			🗆 Remove
			Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) CHANGE ADDRESS FOR MGR ROMULO BROTHER'S PAINTING CORP

511 N 70TH WAY STE, B. HOLLYWOOD, FLORIDA 33024

CHANGE ADDRESS FOR MGR PATRICIA GARCIA MERIDA

511 N 70TH WAY STE B, HOLLYWOOD, FLORIDA 33024

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	DECEMBER 13	2023		
		Hectar	1Canizoz	
		Signature of a member or m	thonzed representative of a membe	<u>д</u>
	HECTOR RAMIRE	Z-ROMULO		
			······································	

Typed or printed name of signee