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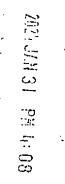
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COVER LETTER

Registration Section Division of Corporations

TO:

HIVESTA	ROBLES CLEANING LLC				
SUBJECT;	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	SOFIA MARTINEZ				
		Name of Person			
	HIVESTA CAPITAL LLO		. E		
		Firm/Company	되는 1년 목가 도		
	2307 MOUNT VERNON	STREET			
		Address			
	ORLANDO, FL 32803		2824 JAN 31 FR 44 08		
		City/State and Zip Code	08		
	SOFIA@HIVESTACAPIT				
	E-mail address: (to be used for future annual report not	dication)		
For further information of	concerning this matter, please c	all:			
SOFIA MARTINEZ		407 603-9708			
Name o	d Person		e Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$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 S		Street Address: Registration Se	ction		
Division of Corporations		Division of Corporations			
P.O. Box 632		The Centre of T	•		
Tallahassee,	rl <i>323</i>	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIVESTA ROBLES CLEANING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{12/07/2023}{1}$ and assigned Florida document number $\frac{L23000542372}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) ಒ Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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>	<u>Name</u>	Address	Type of Action
MGR	HIVESTA CAPITAL LLC	2307 MT VERNON STREET ORLANDO, FL 3280	3 □Add
			≣Renюve
MGR	GARZON, ANGELICA	2307 MT VERNON STREET ORLANDO, FL 3280	3 ∃ Add
			□Remove
	<u> </u>	2021 Change	
MGR	OCHOA. MARIA	1152 PEARL TREE ROAD DELTONA, FL 32725	ယ □Add .
			Remove
		; r	□Change
MGR	ROBLES. CAROLINA	1604 TRAVERTINE TERRACESANFORD, FL 327	71 □Add
			=Remove
		-	□Change
MGR	ROBLES ROMAN, SOEDDY CAI	1604 TRAVERTINE TERRACE SANFORD, FL 32	77 ■ Add
		□Remove	
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