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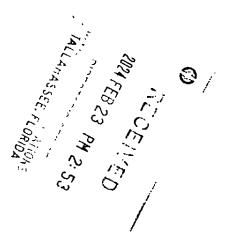
| (Re | equestor's Name) | <u>.</u> |
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| (Cıl | ty/State/Zip/Phone # |) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Name) | |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Filin | ng Officer: | · |
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Office Use Only



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COVER LETTER

| | n Section Corporations | | 4 |
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| | O PIEROB, LLC | | |
| SUBJECT: | Name of Lim | nted Liability Company | |
| | | | |
| | s of Amendment and fee(s) are sub | - | |
| Please return all corre | espondence concerning this matter | to the following: | |
| | Francisco Guanipa | | |
| | | Name of Person | |
| | | Firm/Company | |
| | 15315 Wildflower Cir | | |
| | | Address | , <u>.</u> |
| | Naples, Fl. Zip Code: 341 | 19 | |
| | guanipafranciscoj@gmail.c | City State and Zip Code | |
| | | to be used for future annual report not | ification) |
| For further information | on concerning this matter, please ca | all: | |
| Francisco Guanipa | | 786 5538640 | |
| Nar | ne of Person | at () Area Code Daytin | ne Telephone Number |
| Enclosed is a check f | or the following amount: | | |
| ■ \$25,00 Filing Fee | e \$30.00 Filing Fee & Certificate of Status | S55,00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| <u>Mailing Ado</u> Registratio | | <u>Street Address:</u> Registration Se | ction |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

1 . 2. 3 . 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GRUPO PIEROB, LLC | | |
|--|---|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our record Liability Company) | <u>(s.</u>) |
| The Articles of Organization for this Limited Liability Company Florida document number 1.24000030583 | were filed on January 22, 2024 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| The new name must be distinguishable and contain the words "Limited Liabil | hity Company," the designation "LLC | " or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 2346 broadway | 2024 |
| (Principal office address MUST BE A STREET ADDRESS) | Atoria, NY 11106 | |
| | | 23 |
| Enter new mailing address, if applicable: | 15315 Wildflower Cir | E E C |
| (Mailing address MAY BE A POST OFFICE BOX) | Naples, Fl. Zip Code: 34119 | 25 ö |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: | nddress on our records, <u>enter</u> | the name of the new registered |
| New Registered Office Address: | | |
| | Enter Florida street addres | S |
| | , FI | orida Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | Ciņ | ap cine |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, as provided for in Chapter 605, | nd I am familiar with and F.S. Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------------------|---------------------------------|----------------|
| MGR | Gino Raul Piedra Parodi | 2346 broadway Astoria, NY 11106 | = Add |
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| Note: U | e date, if other than the date of filing: |
| he record : ord is filed | 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 |
| Dated | letrung 23 2024. |
| | Signature of a member or authorized representative of a member |
| | Signature of a member or authorized representative of a member |
| | |

Filing Fee: \$25.00