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Tallahassee, FL 32314

COVER LETTER

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то:	Registration S Division of Co			(((H2400	0081319 3)))
	SARDITO	· DLLC			
SUBJEC	Л:		nted Liability Company		
The encl	osed Articles o	f Amendment and feets) are sub	mitted for filing.		
Please re	turn all corresp	ondence concerning this matter	to the following:		
		Jannett A. Rodriguez			
			Name of Person		
		H&R Tax Advisors LLC			292
			Firm/Company		2024 E E B
		12741 SW 38TH TER			~> ~
			Address	, , , , , , , , , , , , , , , , , , ,	•
		Miumi, FL 33175			(1) 9: 09
			City State and Zip Code		
		jannett@hrtaxadvisors.com			_
		E-mail address (to be used for future annual repor	t notification)	
For furth	er information	concerning this matter, please c	all;		
Janneit A	. Rodriguez		786 857-625	52	
	Name	of Person	at () Area Code D	nytime Telephone Number	_
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P.O. Box 6327		The Centre of Tallahassee			

(((H240000813193)))

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H240000813193)))

SARDITO LLC			
(Name of the Limited	Liability Compa V Florida Limited	ny as it now appears on our l liability Company)	ecords.)
The Articles of Organization for this Limited Liab Florida document number 1.24000041656	·		-
This amendment is submitted to amend the follow A. If amending name, enter the new name of t Not applicable The new name must be distinguishable and contain the wor Enter new principal offices address, if applical (Principal office address MUST BE A STREET	ving:		
A. If amending name, <u>enter the new name of t</u>	<u>he limited liab</u>	ility company here:	
Not applicable			
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ny Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	Not applicable	3 ¥ &1
(Principal office address MUST BE A STREET	ADDRESS)		רי
			20
			7
Enter new mailing address, if applicable:		Not applicable	ۻ
(Mailing address MAY BE A POST OFFICE BO	0X)	***	9: 09
	······································		
B. If amending the registered agent and/or reg agent and/or the new registered office address Name of New Registered Agent:		ddress on our records, <u>e</u>	nter the name of the new registers
New Registered Office Address:		Enter Florida street a	ddress
			. Florida
		City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this ch	and complete red agent as p gistered office	performance of my duti <mark>e</mark> provided for in Chapter (es, and I am familiar with and 505, F.S. Or, if this document is
	If Chan	ging Registered Agent, Signar	sure of New Registered Agent

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

(((H240000813193)))

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RAMIRO DANIEL ALDAZ	c/o 12741 SW 38 TER	■Add
		MIAMI, FL 33175	□Remove
			□Change
			ZAdd
			□Remove
			☐Change 272
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		<u></u>	□ Remove =
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D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Not applicable		
			
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(It an e <u>Note:</u>	tive date, if other than the date of filing:		
docui	nent's effective date on the Department of State's records.		
If the record is t	ord 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 died.	ir the	
Datec	FEBRUARY 17TH . 2024		
	Signature of a member or authorized representative of a member		
	RODRIGO JAVIER ALDAZ		

(((H24000081319 3)))

Typed or printed name of signee