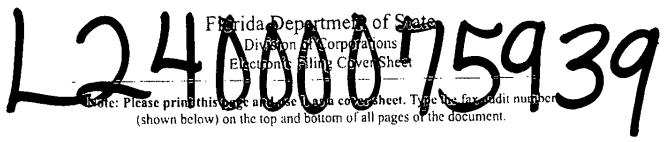
3/15/24, 3:42 PM

Division of Corporations



(((H24000101057 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : J&K ACCOUNTING SERVICES LLC

Account Number : I20200000194

: (786)448-3851

: (123)456-789 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EBERESTS LLC**

Certificate of Status	0
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M. SOLOMON MAR 1 8 2024

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EF20101000124

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BERESTS LLC	
(Name of the Limited Liah) (A Flori	ility Company as it now appears da Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Florida document number L24000075939	Company were filed on 02/1	2/2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here	:
The new name must be distinguishable and contain the words "Lin	mited Liability Company." the des	gnation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	## Nove building	
3. If amending the registered agent and/or registered gent and/or the new registered office address here: Name of New Registered Agent:	d office address on our reco	ords, enter the name of the new register
New Registered Office Address:		
Hew Registered Office Address:	Enter Florida street naddress	
		Florido
		Florida Zip Code
ew Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent of covisions of all statutes relative to the proper and coexcept the obligations of my position as registered ageing filed to merely reflect a change in the registered manany has been notified in writing of this change.	Omplete performance of my vent as provided for in Cha	duties, and I am familiar with and
	If Changing Registered Agent.	Signature of New Registered Agent

H240001010573

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 = Mnnager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	EBTS MANAGEMENT LLC	980 NW 106 TH AVENUE CIR	
		MIAMI, FL 33172	
			□ Change
SEC	VALERIA VERASTEGUI MORON	980 NW 106 TH AVENUE CIR	🗆 Add
		MIAMI, FL 33172	CRemove
			■Change .
			🗆 Add
			□ Remove
			□Change
·			
			DRemove
			OChange
	***		(]Add
			Remove
			①Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00