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COVER LETTER

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Mailing Address:
Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO: Registration Division of C								
SUBJECT:	Pase a Tierra Product	ions LLC						
	Name of Lin	nited Liability Company						
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.						
Please return all corres	pondence concerning this matter	to the following:						
		Lesnay Vazquez						
		Name of Person						
Pase a Tierra Productions LLC Firm/Company								
		Firm/Company						
	13311 SW 82 ST							
		Address						
		Miami , FL 33183						
		City/State and Zip Code						
	F-mail address:	esnay@hotmail.com (to be used for future annual repor	t notification)					
For further information	concerning this matter, please of	•	t nounceston)					
Lesna	y Vazquez	at (305) 3	31-8886					
Name	of Person	Area Code D	aytime Telephone Number					
Enclosed is a check for	the following amount:							
X \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)					

Street Address:

Registration Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pase	a Tierra Productions LLC			
(Name of the Limited (A	Liability Company as it now appears on of Florida Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liab lorida document number L24000081086	, . ,	02/14/2024	4 and assig	ned
his amendment is submitted to amend the follow	ing:			
a. If amending name, enter the new name of th	e limited liability company here:			
he new name must be distinguishable and contain the word	ls "Limited Liability Company," the designa	ation "LLC" or the a	bbreviation "L.L.	C."
nter new principal offices address, if applicab	le:			
Principal office address MUST BE A STREET A	ADDRESS)			
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	2X)			
·				
3. If amending the registered agent and/or regi		ds, <u>enter the nan</u>	ne of the new 1	regist
gent and/or the new registered office address h	<u>iere</u> :			
Name of New Registered Agent:			·	
New Registered Office Address:				Car +
	Enter Florida st	reet address	1. 1.	41
_	·	, Florida	10	- r
	City	_	Zip Code	

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.

New Registered Agent's Signature, if changing 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Carlos M Morejon	13311 SW 82 ST Miami FL 33183	(X) Add
			□Remove
			□ Change
Manager	Rolando Diaz	13311 SW 82 ST Miami FL 33183	XIAdd
			□Remove
			□ Change
			□ Add
			□Remove
			□ Change
		_	□Add
		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	Remove
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