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(((H240001381783)))



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Division of Corporations

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From:

Account Name 🦪 MARKO & MAGOLNICK, P.A.

Account Number # 120050000186 Phone # (305)285-2000

Fax Number

: (305)285-5555

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

Email Address: corporateservices@mm-pa.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEXASWITCH GLOBAL, LLC

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T. LEMIEUX
APR 17 2024

From: 3052855555

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000138178 3)))

NEXASWITCH GLOBAL, LLC	
(Name of the Limited ) (A	iability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabsellorida document number L24000096372	lity Company were filed on 02/23/2024 and assigned and assigned
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:
(Principal office address MUST BE A STREET A	
	2i
Enter new mailing address, if applicable:	2021 <sub>1</sub> AF
(Mailing address MAY BE A POST OFFICE BO	x <sub>2</sub> =
B. If amending the registered agent and/or registered agent and/or the new registered office address h	tered office address on our records, enter the name of the new-register
agent and/or the new regarded office address in	ere:
Name of New Registered Agent:	n en
Manue of New Registered Algeria.	
New Registered Office Address:	Enter Florida street address
	City , Florida Zip Code
New Registered Agent's Signature, if changing Regis	·
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register	gent and agree to act in this capacity. I further agree to comply with the nd complete performance of my duties, and I am familiar with and sed agent as provided for in Chapter 605, F.S. Or, if this document is stered office address, I hereby confirm that the limited liability
	If Changing Registered Agent, Signature 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 (((H24000138178 3)))

(((H24000138178 3)))

Title	Name	<u>Address</u>	Type of Action
MGR	SANCHEZ, GABRIEL	3001 SW 3RD AVENUE	□Add
		MIAMI, FL 33129	□Remove
MGR	MERCED, JAMES	3001 SW 3RD AVENUE	
		MIAMI, FL 33129	□Remove
MGR	SANCHEZ, ANDRES	3001 SW 3RD AVENUE	□Add
		MIAMI, FL 33129	Renove
			■ Change
MGR	SANCHEZ, SANTIAGO	3001 SW 3RD AVENUE	■Add
		MIAMI, FL 33129	Remove
			□Change
D	GONZALEZ, ANA MARIA	848 Brickell Ave	DAdd
		Suite 810	■Remove
		Miumi, FL 33133	
MGR	MERCED, MARIA PAULINA	848 Brickell Ave	□Add
		Suite 810	■ Remove
		Miami, FL 33133	☐ Change

From: 3052855555

(((H24000138178 3))) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (Optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated April 12 Signature of a member or authorized representative of a member James Merced

Typed or printed name of signee