6/12/24, 4:56 PM

Division of Corporations

H24000206164 3

Florida Department of State
Division of Corporations
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> Division of Corporations
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> Phone   : (305)527-6617
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MATEDUR LLC

Certificate of Status	0
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H24000206164 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MATEDUR LLC

[Name of the Limited Liability Company as it now appears on our records.]
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on __03/26/2024__ and assigned Florida document number __L24000155359__ .

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 14334 BISCAYNE BLVD

(Principal office address MUST BE A STREET ADDRESS)   NORTH MIAMI, FL 33181

Enter new mailing address, if applicable: 14334 BISCAYNE BLVD

(Mailing address MAY BE A POST OFFICE BOX)   NORTH MIAMI, FL 33181

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ROMAR INTERNATIONAL LLC

New Registered Office Address: 14334 BISCAYNE BLVD
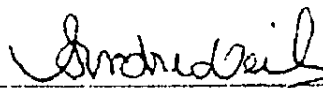   *Enter Florida street address*

NORTH MIAMI _____ , Florida _33181_
             City   *Zip Code*

New Registered Agent's Signature, If changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

H24000206164 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H24000206164 3

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	DURAN, GASTON OSCAR	14334 BISCAYNE BLVD	☐ Add
		NORTH MIAMI, FL 33181	☐ Remove
			■ Change
AMBR	DURAN, MATEO BLAS	14334 BISCAYNE BLVD	☐ Add
		NORTH MIAMI, FL 33181	☐ Remove
			■ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

H24000206164 3

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

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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 filing 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   JUNE 7TH   2024
_____

Signature of a member or authorized representative of a member

GASTON OSCAR DURAN
_____

Typed or printed name of signee