Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000023765 3)))



H250000237653ABC/

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To:

Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA COLONIA WELLNESS CENTER NORTH MIAMI LLC

Certificate of Status	0
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T. LEMIEUX

From: Yanet Avila

Electronic Filing Menu

Corporate Filing Menu

Help JAN 24 2023

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

LA COLONIA WELLNESS CENTER		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our reco- ited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L24000165740</u>	oany were filed on 04/08/2024	and assigned
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 "LI	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		<u> </u>
		<u></u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
		= -
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, ente	er the name of the wew registered
Name of New Registered Agent:		
•		
New Registered Office Address:	Enter Florida street addr	ress
	I	Plorida
	City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, as provided for in Chapter 605	and I am familiar with and 5, F.S. Or, if this document is

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

<u>Title</u>	Name	Address	Type of Action
MGR	LA COLONIA WELLNESS CENTER, INC.	167 WEST 23RD STREET	□Add
		HIALEAH, FL 33010	⊠Remove
			□Change
MGR	DAINERYS ROJAS	167 WEST 23RD STREET	■ MAdd
		HIALEAH, FL 33010	□Rcmove
		·	☐Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		 	□Change
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			□Add
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			□Change
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			□ Конюус
			Change

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Signature of a member authorized representative of a member	Dated JANUARY 21ST , 2025
Signature of a member authorized topresentative of a member	XXla
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YENIN ACEVEDO	V AND