

L24000 197 331

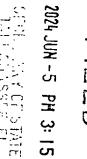
(Red	questor's Name)
(Add	dress)
(Ado	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu:	siness Entity Name)
(Dor	cument Number)
Certified Copies	Certificates of Status
Special Instructions to I	Filing Officer:

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06/05/24--01025--011 **25.00



COVER LETTER

TO: Registration Se Division of Cor			
TERRENA	S LLC		
SUBJECT:	Name of Lin	nited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	DIANA ESPINAL ACEV	EDO	
		Name of Person	
	TERRENAS LLC		
		Firm/Company	
	8330 NW 107TH PL, UN	TT 7	
		Address	_
	DORAL, FL 33178		
		City/State and Zip Code	
	DIANA.ESPINAL8@GMA	AIL.COM (to be used for future annual report notification)	_
For further information c	oncerning this matter, please o	•	
DIANA ESPINAL ACE	VEDO	305 587-3699 at ()	
Name o	f Person	Area Code Daytime Telephone Num	nber
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	O Filing Fee, ficate of Status & fied Copy onal copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Section	
Division of C		Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	- 010
Tallahassee, l	TL 32314	2415 N. Monroe Street, Suite	6 910

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TERRENAS LLC	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fill Florida document number <u>L24000197331</u>	iled on 04/26/2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	24 J
	S. Or I
Enter new mailing address, if applicable:	<u> </u>
	, ŦŢ, _
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	3: <u>3: -</u>
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	
B. If amending the registered agent and/or registered office address	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	s on our records, enter the name of the new registere
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here: Name of New Registered Agent:	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here: Name of New Registered Agent:	s on our records, enter the name of the new registers Enter Florida street address , Florida

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	<u>Address</u>	Type of Action
MGR	JOSE V PINTO	2333 BRICKELL AVE, APT 302	= Add
		MIAMI, FL 33129	□Remove
			□Change
			
		-	□Remove
			Change
		□Remove	
			Change
		□ Add	
		□Remove	
		□ Add	
		□Remove	
		Change	
			□ Add
		□ Remove	
			П.С.

Note:	(optional) fective date, if other than the date of filing: (optional) fective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco	rd 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 iled.
Dated	MAY 30TH 2024
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee