

To:

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2024-12-28 05:22:05 UTC-14

18506176383

From: ZenBusiness User

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L240004230049152

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000423004 3))



H240004230043ABCT

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : 120230000190
Phone : (844)449-3674
Fax Number : (512)597 0678

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TALLAHASSEE, FLORIDA

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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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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LAUFINBO LLC

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K. SALY

DEC 30 2024

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TO
ARTICLES OF ORGANIZATION
OF

Laufinho LLC

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

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_____ and assigned _____

The Articles of Organization for this Limited Liability Company were filed on 10-22-2024 and assigned
Florida document number 1.24000449152.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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.

II Changing Registered Agent, Signature of New Registered Agent

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MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Sadgi Lochard	250 E 5TH STREET BROOKLYN	☒ Add
		BROOKLYN, NY 11218	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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EAST DISTRICT OF NEW YORK

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

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SECURITY SERVICE
KATLAN, S. C. 170

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 (1)(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 December 27th, 2024

/s/ Omar Ferguson

Signature of a member or authorized representative of a member

Omar Ferguson

Typed or printed name of signee