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.

(((H250000801063)))



H250000801083ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

3052201440

Fax Number : (850)617-6383

From:

ACCOUNT Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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

| | Address: | | | |
|--------|----------|--|--|------|
| PMAT I | andress: | | | |

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ICAR MIAMI LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

MAR - 4 2025

76 16 17

ij

| · | | | | | | | |
|---|---|-----------------|---------------------------------------|--|--|--|--|
| The Articles of Organization for this Limited Liability Company were filed on 01/06/2025 and assigned Florida document number | | | | | | | |
| <u> </u> | L25000012235 | | | | | | |
| This amendment is submitted to amend the following: | | | | | | | |
| EMOVE: RAUL A HORTA R | e server from the contract of | are removing. | , | | | | |
| | | | | | | | |
| 2297 SW 204 TERR MIAMI, | FLORIDA 33177 | | · · · · · · · · · · · · · · · · · · · | | | | |
| (| | . , . <u>.</u> | | | | | |
| | 1.00 | | | | | | |
| | | | | | | | |
| | ratheres | | | | | | |
| | 4.42 | | | | | | |
| | | | | | | | |
| | | | • | | | | |
| | 01/07/2025 | | ALL'AH | | | | |
| ese articles of amendment w | ere adopted on |) | 平为 | | | | |
| 02/28/2025 ted | | | 3 PH | | | | |
| | Lorge Duy | | 11.07.11. | | | | |
| Signature of | a member or authorized representat | ive of a member | | | | | |
| | JORGE RUIZ ORTEGA Typed or printed name of signes | | | | | | |

Signature of New Registered Agent, if changing