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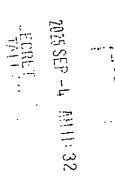
| (Requé                        | estor's Name)  | <del>.</del> |
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| (Addre                        | ss)            |              |
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| (City/S                       | tate/Zip/Phon  | e #)         |
| PICK-UP                       | MAIT           | MAIL         |
| (Busin                        | ess Entity Nar | me)          |
| (Docur                        | nent Number)   | )            |
| Certified Copies              | Certificate    | s of Status  |
| Special Instructions to Filin | ng Officer:    |              |
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## **COVER LETTER**

|                | gistration S<br>vision of Co |  |   |  |
|----------------|------------------------------|--|---|--|
| SUBJECT:       |                              | AILS STUDIO LLC                              |   |  |
| ne no Le i     | ·                            | Name of Lir                                  | mited Liability Company   |  |
| The enclose    | ed Articles of               | Amendment and fee(s) are su                  | bmitted for filing.   |  |
| Please retur   | n all correspo               | ondence concerning this matte                | r to the following:   |  |
|                |                              | J  | G   | 203<br>Se  |
|                |                              | Rosseidy 1. Zerpa Falcon                     |   | TALL<br>TALL   |
|                |                              |  | Name of Person  |  |
|                |                              |  | P   | गुरु   |
|                |                              |  | Counterve .   | - 1 32<br>- 1 32   |
|                |                              |  | E/rm/Company  |  |
|                |                              | 21033 NW 37TH CT                             |   | . 2  |
|                |                              |  | Address   |  |
|                |                              | Miami Gardens, FL 33053                      | 5   |  |
|                |                              |  | City/State and Zip Code   | <del></del>  |
|                |                              | jennifercampistruzojeda@g                    | gmail.com   |  |
|                |                              | E-mail address: (                            | to be used for future annual report notif                           | fication)  |
| For further is | nformation c                 | oncerning this matter, please c              | all;  |  |
| Rosseidy L     | Zerpa Falcon                 | 1  | 786 825-7936  |  |
|                | Name of                      | f Person                                     |   | : Telephone Number   |
| Enclosed is a  | check for th                 | e following amount:                          | •   |  |
| ■ \$25.00 F    | Filing Fee                   | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|                | iling Address                |  | Street Address:   |  |
|                | gistration S<br>ision of Co  | orporations                                  | Registration Sec<br>Division of Com                                 |  |
|                | ). Box 632                   |  | The Centre of Ta  |  |
| Tal            | lahassee, F                  | L 32314                                      |   | Street, Suite 810  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSSYNAILS STUDIO 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 08/18/2025  |                        | and as                | signed                                 |
| Florida document number L25000381083  |                        | _                     | <b>3</b>                               |
| This amendment is submitted to amend the following:   |                        |                       |  |
| A. If amending name, enter the new name of the limited liability company here:  | C-CRU                  | 2025 SEP              | ************************************** |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or t  | he abbrev              | riation "L.           | L.C."                                  |
| Enter new principal offices address, if applicable:   |                        |                       | · .<br>:                               |
| (Principal office address MUST BE A STREET ADDRESS)   |                        | ,<br>                 |  |
| <del>-</del>  |                        | 13                    |  |
| 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 pagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  | name of                | the new               | registered                             |
| , Florida   |                        |                       |  |
| City New Registered Agent's Signature, if changing Registered Agent:  | Zi                     | ip Code               |  |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further provisions of all statutes relative to the proper and complete performance of my duties, and I a accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. (being filed to merely reflect a change in the registered office address. I hereby confirm that the company has been notified in writing of this change. | ım famil<br>Or-if ılıı | liar with<br>is docui | and<br>nentis                          |

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          | Rosseidy L Zerpa Falcon |  | □Add                                |
|              |                         |  | □Remove                             |
|              |                         | 21033 NW 37TH CT Miami Gardens, FL 33055 |                                     |
|              |                         |  | □Add                                |
|              |                         |  | 🗀 Remove                            |
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| Effective date, if other than the date of filing:  ((f) 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 605 020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  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 ord is filed.  Dated  Sept 2nd  2025  Signature of Smeribeer or authorized representative of a member  |                                      |                                     |  |
|--|--------------------------------------|-------------------------------------|--|
| Effective date, if other than the date of filing:  |                                      |                                     |  |
| Effective date, if other than the date of filing:  [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 605.020 More: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The effective date and delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed.  Dated  Sept 2nd 2025  Raddon Sept 2nd 2025  |                                      |                                     |  |
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| Root On  | rd is filed.                         |                                     | ,  |
| Root On  | Supt 2nd                             | 2025                                |  |
| Signature of a member or authorized representative of a member   | Dated                                |                                     |  |
| Signature of a member or authorized representative of a member   |                                      | $n \dots n$                         |  |
| Signature of a member or authorized representative of a member   |                                      | Kont fue                            |  |
|  |                                      | Signature of a member or authorized | I representative of a member                                   |
| Rosseidy L Zerpa Falcon  | ·                                    | Typed or printed page               |  |

Filing Fee: \$25.00