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Division of Corporations

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From:

Account Name : AMERICAN BROKER MANAGEMENT

Account Number : I20250000018 : (954)766-1511 Fax Number : (534)200-5022

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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAISES Y FURO INVERSIONES LLC

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SEP 2.5 2025

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



RAISES Y FURO INVERSIONES LLC	
(Name of the Limited Liab (A Flor	oility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on and assigned
Florida document number L25000414781	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
RAISES Y FUTURO INVERSIONES LLC	
The new name must be distinguishable and contain the words "L	imited 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 ADI	ORESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
If amending the registered agent and/or register	ed office address on our records, enter the name of the new registe
gent 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

	Authorized Member		
Title	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□ Addig T
			□ Addig T
			□ Remove
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fective date, if other than t in effective date is listed, the date r ote: If the date inserted in this icument's effective date on the	must be specific and cannot block does not meet the	e applicable statutory	g or more than 90 days after	tional) er filing.) Pursuant to 605.0207 nis date will not be listed as
ecord specifies a delayed effectis filed.	ctive date, but not an effe	ective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
SEPTEMBER 24	2025 - ير	5		
ted		15		
	(VV V / / \			
	Signature of a member	of authorized represen	tative of a member	

Filing Fee: \$25.00