M21000013322

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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALL AHASSEE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: And STR FLLL Name of Foreign Limited Liability Company	
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Anita Comisky I Rob McCormack Name of Person	
Ander STR FL LLC Firm/Company	
Fernanding Black FL 32034 City/State and Zip Code The State and Zip Code	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
at ()	
Name of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Area Code & Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	
Enclosed is a check for the following amount: S55 Filing Fee & S55 Filing Fee & S60 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Andes STR FLLIC
Enter new principal office 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)
2. The Florida document number of this limited liability company is: M210000133 ZZ
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 10/8/2021
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: (must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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 Zip Code
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 Changing Registered Agent, Signature of New Registered Agent

Title/ Capacity	<u>Name</u>	Address Typ	e of Action
Manager	Robert C. McCormack, Jr.	254 Mariborough St, Apt 3, Boston, MA 02116	ŒÁdd
			□Remove
·····			⊡Add
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<u>_</u>		JALL AHASSES, FI	122 05 2
Horementione	der the law of which this entity is organ	the official having custody of peroads in the	□ Add □ Remove

Filing Fee: \$25.00

RESOLUTION GRANTING SIGNING AUTHORITY TO CONDUCT BUSINESS

for

ANDES STR FL, LLC

a Delaware limited liability company

WHEREAS, ANDES STR FL, LLC, a Delaware limited liability company, desires to grant signing authority to certain person(s) described hereunder.

RESOLVED, that the Board of Directors is hereby authorized and approves granting signing authority to conduct business to any one of the following person(s):

ROBERT C. MCCORMACK, JR.

MATIAS DUHART DIAZ

The foregoing signing and authority granted shall include, but shall not be limited to, the execution of Deeds, powers of attorney, transfers, assignments, contracts, obligations, certificates, and other instruments of whatever nature entered into by this Company.

The undersigned hereby certifies that he is the Member, Director and duly elected and qualified Officer and the custodian of the books and records and seal of ANDES STR FL, LLC, a company duly formed pursuant to the laws of the state of Delaware and that the foregoing is a true record of a resolution duly adopted at a meeting of the (Board of Directors) and that said meeting was held in accordance with state law and the Bylaws of the above-named Company on 04/18/2022 _____, and that said resolution is now in full force and effect without modification or rescission.

IN WITNESS WHEREOF, I have executed my name as Secretary and have hereunto affixed the corporate seal of the above-named Company this 18 day of April 2022.

Sebastian Rivas Garcia

Member, Director and Officer