that my name appears above, or on an attachment with all other like empowered. SIGNATURE: GONZALO MORENO

Electronic Signature of Signing Authorized Person(s) Detail

2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L21000262292

Entity Name: GONZALO SOLUTIONS LLC

Current Principal Place of Business:

1000 NORTHWEST 7TH ST APT 1007 MIAMI, FL 33136

Current Mailing Address:

1000 NORTHWEST 7TH ST APT 1007 MIAMI, FL 33136 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

MORENO, GONZALO 1000 NORTHWEST 7TH ST APT 1007 MIAMI , FL 33136 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: GONZALO MORENO			02/13/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	MORENO, GONZALO	Name	CITERIO, FAUSTINA	
Address	1000 NORTHWEST 7TH ST APT 1007	Address	1000 NORTHWEST 7TH ST APT 1007	
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136	

AMBR

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

02/13/2023

0_,.0,_

FILED Feb 13, 2023 Secretary of State 9483346081CR

Certificate of Status Desired: No

Date