Electronic Signature of Signing Authorized Person(s) Detail

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

SIGNATURE: ORVEST LAW

APT 5 TAMPA, FL 33629 US

FEI Number: 88-1456387

Current Mailing Address: 2910 RUBIDEAUX STREET

DOCUMENT# L22000124128

2910 RUBIDEAUX STREET

TAMPA, FL 33629

APT 5

Entity Name: AMOR POR LA SALSA, LLC

Current Principal Place of Business:

Name and Address of Current Registered Agent:

LAW, ORVEST 2910 RUBIDEAUX STREET APT 5 TAMPA, FL 33629 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:

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

Electronic Signature of Registered Agent

Authorized Person(s) Detail : Title MGR Name LAW, ORVEST 2910 RUBIDEAUX STREET, APT 5 Address City-State-Zip: TAMPA FL 33629

Apr 09, 2025 Secretary of State 1360091643CC

Certificate of Status Desired: No

04/09/2025

Date

Date