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Division of Corporations

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From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122

*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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ARTICLES OF AMENDMENT FO TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Cor	opany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on July 29, 2011	and assigned
Florida document number L11000087409		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited I	ability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or th	e abbreviation "L.I. C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		
	······································	
Satan nama madilina a Adam a 16 applicables	1801 West 27th Street	
,,	1801 West 27th Street Miami Beach, Florida 33140	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>		. TO 23
,,		023 £
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Mailing address MAY BE A POST OFFICE BOX 3. If amending the registered agent and/or registered office	Miami Beach, Florida 33140 💢 -	ame of the new registo
Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address here:	Miami Beach, Florida 33140 💢 -	ame of the new registe

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.

Cuv

If Changing Registered Agent, Signature of New Registere	

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Doct Sign Enverse (D. 92F7E9D4-2125-4469-BE48-2BCGC2270EC2 (((H23000168203/3)))) it amending Authorized rerson(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

Title	<u>Name</u>	Address	Type of Action
MGRM	JEFFREY KRAMER	3615 NW 2nd Ave	□Add
		Miami, FL 33127	≣Remove
			[]]Change
		EDAdd	
		[]Remove	
			
		bbAU	
		····	(7)Remove
		C) Add	
		[]Remove	

		∏Remove	
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		****	☐ Change

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D. It amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 	
<u></u>	

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I the record specif ecord is filed.	lies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the
Dated	<u>May 4</u> . <u>2023</u> .
	A Company of the second of
•	Signature of a member or authorized representative of a member
Ka	ndy Kramer
	Typed or printed name of signee

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