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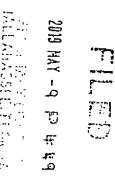
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COVER LETTER

TO:	Registration Se Division of Cor		÷				
CUDIC		sposito Holding Company LLC	•				
SUBJE		Name of Limited Liability Company					
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		Kathy Munkelwitz					
			Name of Person				
		Suplee Shea Cramer & Ro	cklein PA				
			Firm/Company				
		800 S Osprey Ave					
			Address	_			
		Sarasota FL 34236					
		City/State and Zip Code					
		kathy@suplee-shea.com					
		E-mail address: (to be used for future annual report notifi	cation)			
For furt	ther information o	oncerning this matter, please ca	all:				
Kathy	Munkelwitz		941 366-3600 at ()				
	Name o	of Person	Area Code Daytime	Telephone Number			
Enclose	ed is a check for the	he following amount:					
■ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Anthony Esposito Holding Company LLC

(Name of the Limited Liability Company as it now appear software cords.)

(A Florida Limited Liability Company)

4: 49

The Articles of Organization for this Limited Lia Florida document number L19000095794	bility Company were filed on April	8 2019 and assigned
Florida document number	·	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	······
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E		
B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent:		ur records, <u>enter the name of the new</u>
-		
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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Anthony Esposito	1350 Main Street Unit 702	
		Sarasota FL 34236	Add
		Salasola FL 34230	■ Remove
	Thomas A Esposito	1350 Main Street Unit 702	Change
MGR	- Torrido I Coposito	1550 Mani Street Onli 702	Add
		Sarasota FL 34236	
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			Change
MGRM	David A Esposito	1350 Main Street Unit 702	
		Sarasota FL 34236	⊟ Add
			□ Remove
			D .cl
			□ Change
			Add
			□ Remove
			L Remove
			Change
			D Add
			☐ Remove
			Change
			Onlinge
			
		_	
			□ Change

. 11 anic	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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E. Effecti	ve date, if other than the date of filing: (optional)
Note:	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the int's effective date on the Department of State's records.
f the rec (b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	May 3 2019. Esposito
	Signature of a member or authorized representative of a member
	Thomas A Esposito, MGR

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00