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| (Ře                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | ddress)            |             |
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| (Ci                     | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | WAIT               | MAIL        |
| (Ві                     | usiness Entity Nar | ne)         |
| (De                     | ocument Number)    |             |
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DATE:

8/27/21

NAME: ASAP SALES ONLINE 01, LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ASAP SALES ONLINE 01, LLC   |   |  |  |
|---|---|--|--|
| (Name of the Limited Liability Comp.<br>(A Florida Limited  | any as it now appears on our records.) Liability Company)         |  |  |
| The Articles of Organization for this Limited Liability Company   | were filed on May 13, 2021 and assigned                           |  |  |
| lorida document number L21000211758   | <u> </u>  |  |  |
| his amendment is submitted to amend the following:  |   |  |  |
| . If amending name, enter the new name of the limited liab  | pility company here:  |  |  |
| MERICAN DREAM TEAM SALES, LLC   |   |  |  |
| ne new name must be distinguishable and contain the words "Limited Liabi  | lity Company," the designation "LLC" or the abbreviation "L.L.C." |  |  |
| nter new principal offices address, if applicable:  | 4530 S. Orange Blossom Trail #904. Orlando: FL 3839               |  |  |
| Principal office address MUST BE A STREET ADDRESS)  |   |  |  |
|   |   |  |  |
| nter new mailing address, if applicable:  | 4530 S. Orange Blossom Trail #904, Orlando, EL-32839 d            |  |  |
| Mailing address MAY BE A POST OFFICE BOX)   |   |  |  |
| summy under the Hold of the Body  |   |  |  |
| . If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent: | address on our records, <u>enter the name of the new regist</u>   |  |  |
|   |   |  |  |
| New Registered Office Address:  | Enter Florida street address                                      |  |  |
|   | Elouido   |  |  |
| <del></del>   | , Florida   |  |  |

#### 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 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             |
|--------------|------------------------|---|----------------------------|
| AMBR         | Andikira Loons Ltd.    | Midtown Building D.R. Walwyn Square, Suite 625  | □Add                       |
|              |                        | Charlestown, Nevis KN0802   | =Remove                    |
|              |                        |   | □Change                    |
| MGR          | ATOMIC ADRENALINE, LLC | 4530 S. Orange Blossom Trail #904, Orlando, Fl. 32  | 83<br><b>≣</b> Ad <b>d</b> |
|              |                        |   | □Remove                    |
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| Fective date, if other than the oneffective date is listed, the date must | ate of filing:      |              |                                       | (                                 | optional)                            |                       | 40503              |
| ote: If the date inserted in this block                                   | ck does not meet th | e applicable | e of filing or mo<br>statutory filing | re than 90 days<br>; requirements | after filing.) Pu<br>, this date wil | rsuant to<br>I not be | listed :           |
| cument's effective date on the Dep  | partment of State's | records.     |                                       |                                   |                                      |                       |                    |
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| ecord specifies a delayed effective is filed.                             | date, but not an en | ective time. | a 12.01 a.m. c                        | n me camer o                      | 1. (U) THE 31                        | our day               | arter to           |
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