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COVER LETTER

TO:

	Registration 5 Division of Ce			
SUBJEC		NG KEYS LLC		
SUBJEC	·I:	Name of Lim	ited Liability Company	
The enclo	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	oondence concerning this matter	to the following:	
		Brandon T. Hatton		
			Name of Person	
		Conscious Wealth Living.	LLC	
			Firm/Company	
		407 Lincoln Road, Suite 6	Н, РМВ 227	
			Address	
		Miami Beach, FL 33139		
			City/State and Zip Code	
		brandon.hatton@hattoninv	estments.com	
		E-mail address: (to be used for future annual report no	tification)
For furthe	er information	concerning this matter, please c	all:	
Brandon	T. Hatton		305 876-6903	
	Name	of Person	Area Code Daytii	ne Telephone Number
Enclosed	is a check for	the following amount:		
■ \$ 25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Addra</u> Registration		Street Address: Registration So	ection
	_	Corporations	Division of Co	
	P.O. Box 63		The Centre of	Tallahassee
	Tallahassee.	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DROPPING KEYS LLC				
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited	iny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited I	Liability Company	were filed on <u>04/26/2022</u>	and assigned	
Florida document number L22000197754	 ,		· ·	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
Conscious Wealth Living, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "	'LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		227 Miracle Mile #4		
(Principal office address MUST BE A STREE	ET ADDRESS)	Coral Gables, FL 33134		
Enter new mailing address, if applicable:		407 Lincoln Road, Suite 6H, PMB 227		
(Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, FL 33139		
B. If amending the registered agent and/or	registered office a	nddress on our records, <u>en</u>	ter the name of the new register	
agent and/or the new registered office addre	ss here:			
Name of New Registered Agent:	Brandon T. Ha	ton		
New Registered Office Address:	227 Miracle Mi	le #4		
now registered office readiess.		Enter Florida street aa	ldress	
	Coral Gables		, Florida ³³¹³⁴	
		City	.Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi	er and complete	performance of my duties	s, and I am fairitiar with and **	

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>	<u>Address</u>	Type of Action
AMBR	Brandon T. Hatton	227 Miracle Mile #4	
		Coral Gables, FL 33134	□Remove
		·	≣ Change
			□Add
			□Remove
			□Change
			□Add
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ective date, if other reflective date is listed, the te: If the date inserted tument's effective date	he date must be specific I in this block does n	and cannot be prio of meet the appli	r to date of filing or cable statutory fi	(o r more than 90 days a ling requirements,	after filing.) Pursuant	to 605.0207 be listed as
cord specifies a delaye s filed.	ed effective date, but	not an effective t	ime, at 12:01 a.r	a. on the earlier of	f: (b) The 90th da	y after the
s meu.		7	/	-		
May 15		2023				
		_ ·	7///			
	Mu Signature o		nurized representat			

Filing Fee: \$25.00