

L23 000 264 482

(Handwritten mark)

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

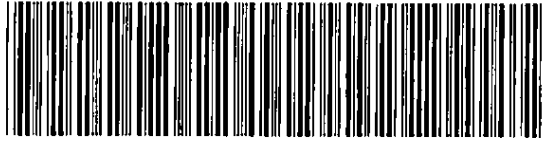
(Business Entity Name)

(Document Number)

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20/24 12-1-20110-014 #01101

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2024 MAY 24 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PartPal LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/31/2023 and assigned Florida document number 1.23000264482.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7507 S Sparkman St.

(Principal office address MUST BE A STREET ADDRESS)

Tampa, FL 33616

Enter new mailing address, if applicable:

7507 S Sparkman St.

(Mailing address MAY BE A POST OFFICE BOX)

Tampa, FL 33616

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Salvator R DeBenedetto

New Registered Office Address:

7507 S Sparkman St.

Enter Florida street address

Tampa

City

Florida

33616

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>	<u>Address</u>	<u>Type of Action</u>
CFO	Evan D Morgan	21 Camden St, Apt 2114	<input type="checkbox"/> Add
		Scarborough, ME 04074	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
COO	Salvator R DeBenedetto	7507 S Sparkman St	<input type="checkbox"/> Add
		Tampa, FL 33616	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CEO	Owen M Cascio	7507 S Sparkman St	<input type="checkbox"/> Add
		Tampa, FL 33616	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MBR	Gerald A Marks	511 West Cleveland St. Unit 714	<input type="checkbox"/> Add
		Tampa, FL 33606	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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