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COVER LETTER

TO: Registration Se Division of Cor					
AMY LEE SUBJECT:	INTERNATIONAL HOLDIN	IGS, L.L.C.			
	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub	•			
	Brad H. Milhauser, Esq.				
		Name of Person	_		
	Huth, Pratt & Milhauser, F	PLLC			
		Firm/Company			
	2500 N. Military Trail, Su	ite 460			
	•	Address			
	Boca Raton, FL 33431				
	brad@hpmlawyers.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report n	otification)		
For further information of	concerning this matter, please c	all:		2021 \$.50 TA	
Brad H. Milhauser, Esq.		561 392-1800 at ()		2021 SEP : SEUKL K TALLA	. 0
Name o	f Person		ime Telephone Number	P 23 AM	, 200 200 200 200 200 200 200 200 200 200
Enclosed is a check for t	he following amount:			~(: -n-	102.50
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMY LEE INTERNATIONAL HOLDINGS, L.L.C.

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on or Liability Company)	our records.)	:
The Articles of Organization for this Limited Liability Company Florida document number L00000002470	were filed on 03/03/20	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designat	ntion "LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if applicable:		201	:
(Principal office address MUST BE A STREET ADDRESS)		1 S	<u></u>
		12 P	1 (2) 1 (2)
		ξ- ω ·	 [";
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		- H	-
		28	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our record	ds, enter the name of the new regi	ster
New Registered Office Address:	Enter Florida stre		_
	Enter Florida Sire	eet aaaress	
	City	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code	•
· · · · · · · · · · · · · · · · · · ·			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my di	luties, and I am familiar with and	ł

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	Howard A. Cohen	3901 SW 4th Ave, Suite 400	□Add
		Davie, FL 33314	■Remove
			□Change
MGR	Amy H. Cohen	3911 SW 47th Ave, Suite 914	≡ Add
		Davie, FL 33314	□Remove
			□Change
			□Add
		·	□Remove
			200 GRange
			Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. II alli	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
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-		191 / 1925	7:	, -
-		<u> </u>	28	
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-				
(If an eff <u>Note:</u>	ive date, if other than the date of filing: [Optional] detive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purse If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n ent's effective date on the Department of State's records.	uant to 605. of be liste	0207 (3)(t d as the	o)
If the recor record is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th led.	day after	the	
Dated	Mal			
	Signature of a member or authorized representative of a member Army H. Cohen			

Filing Fee: \$25.00

Typed or printed name of signee