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COVER LETTER

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enn reer.		e Associates, LLC	•		
SUBJECT:		Name of Lim	ited Liability Company	<u></u>	
The analogy	l Amelinan C	No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	min. 1.6 . 61.		
		Amendment and fee(s) are sub-	-		
Please return	i ali correspo	ondence concerning this matter	to the following:		
		Charles Uslander			
			Name of Person		
		Little Eagle Associates, LI	.C		
Firm/Company					
2076 Sunset Point Rd Apt 143					
			Address	·	
		Clearwater, FL 33765		 Cs2	
			City/State and Zip Code		
		uslander@gmail.com	to be used for future annual report notifi	cation)	
For further is	nformation o	concerning this matter, please c	·	canon)	
		oncerning this matter, picase c			
Charles Uslander			727 282-4582 at ()		
	Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a	i check for th	he following amount:			
□ \$25.00 F	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)	
	iling Addres		Street Address:		
	gistration ! vision of C	Section Corporations	Registration Sec Division of Corp		
P.O. Box 6327			The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Little Eagle Associates, 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 $\frac{11/5/2002}{}$ and assigned 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address , Florida _ City

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>	<u>Address</u>	Type of Action
AMBR	Maria del Pilar Gonzalez	2076 Sunset Point Rd	□Add
		Ste 143	≣Remove
		Clearwater, FL 33765	_
AMBR	Daniel Uslander	150 Chambers St	
		Apt 1E	
		New York City, NY 10007	-
			□Remove
			000
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	/13/2023			
ective date, if other than the date of filing: _ reflective date is listed, the date must be specific and car	nnot be prior to date of	filing or more than 9	(optional) D days after filing.)	Pursuant to 605 020
te: If the date inserted in this block does not mee	t the applicable statu	itory filing require	ments, this date w	vill not be listed a
cument's effective date on the Department of State	es records.			
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scord specifies a delayed effective date, but not an stilled.	/ /	nor a.m. on the car	ruer of: (b) The	90th day after the
ted January 13	1623 / //.			
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/ /////				
1 / Maple L	uland			