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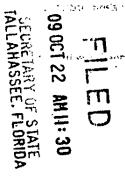
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COVER LETTER

TO: Registration Se Division of Co	ection / rporations		e e e e e e e e e e e e e e e e e e e				
SUBJECT:	Name of Limi	UeHnerts, Lited Liability Company	LC				
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
	Kar	HARY V. ULA HO	ouic				
Name of Person							
			<u> </u>				
		Firm/Company					
	<u> </u>	11 RedLaurel	LN				
		Address					
		Address Estero FLA City/State and Zip Code	33928				
	_	-					
E-mail address: (to be used for future annual report notification)							
	E-mail address: (to be used for future annual report notif	ication)				
For further information concerning this matter, please call:							
	CD	at <u>239</u> 405– Area Code & Daytin	1291				
Name	of Person	Area Code & Daytin	e Leiepnone Number				
Enclosed is a check for t	he following amount:						
\$25.00 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)				

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FIL	ED
va UCT 22	AM
ACCORTARY or recolus SEE	30: ۱۱۱۱۳: معر کاری کار
11 LECOLUMN 2F.E	FEORIDA

•)r	09 OCT 22	-0
GMB TOWE	21+ments	09 OCT 22	AM 11: 30
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears' Liability Company)	on our records SEE	OF STATE
The Articles of Organization for this Limited Liability Compan Florida document number L O HOOO 1.29	by were filed on \mathcal{Q}	118/04	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:	:	
The new name must be distinguishable and end with the words "Lir"L.L.C."	nited Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	141 6	Jest 38th	Street
(Principal office address MUST BE A STREET ADDRESS)	New	York, Ny	10018
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	141 u	Jest 38+ York, 1	L Street 14 10018
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		r records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			•
	Ente	r Florida street addi	ress
 	City	, Florida	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 608, 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 the Mahagers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Address Title Name VLAHOUIC, KA+nryw Remove ☐ Add Remove ☐ Add ☐ Remove □Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated KA+nRYN V. VLA HOU) C
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00