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COVER LETTER

TO: Registration S Division of Co					
Workspace SUBJECT:	e Solutions, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
	Amendment and feets) are sub ondence concerning this matter	-			
	Desiree Learned				
		Name of Person		-	
	Workspace Solutions, LL	C			
		Firm/Company	·	~	
	950 Charles St., Unit 108				
	- 1	Address		SE 301	
	Longwood, FL, 32750			2022 OCT SECRETALLA	٠
	dlearned@workspacesoluti	City/State and Zip Code ons.org		28	7 - 1 = 442 4 1 - 1 - 1 =
	E-mail address: (to be used for future annual report notif	ication)	inco To	۽ - ڏ جنت
For further information of	concerning this matter, please c	all:		2:5 2:5	الدويدة
Desiree Learned		407 878-0651		m 6	
Name o	of Person		Telephone Number	^	
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Mailing Addres	ss:	Street Address:			

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

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

(Name of the Limit	ed Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited L Florida document number L06000042098	ability Company were filed on _	
This amendment is submitted to amend the follo		
A. If amending name, enter the new name o	the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the w	ords "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	S.E. 200
(Principal office address MUST RE A STREE	T ADDRESS)	20 20 THE CO. THE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	28 PH 2: 59
B. If amending the registered agent and/or i agent and/or the new registered office addre		r records, <u>enter the name of the new regist</u> e
Name of New Registered Agent:	James Learned	
New Registered Office Address:	950 Charles St., Unit 108	
Negoticida variate a radional.	Enter I	Florida street address
	Longwood	, Florida 32750
	City	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.

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>	Type of Action
MGR	Bryan Learned	no fixed address	□Add
			Remove
AMBR	Shawn Souvannarath	301 Clydesdale Circle	≣Add
		Sanford, FL 32773	□Remove
			20季 OC SEGRE TALL
			CCT Remove.
			Change Change
			□Remove
			□Change
	70		□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□ Change

Redistribution is as follows: James Learned - 30% Jaime Velez - 30% Enrique Aponte - 30% Shawn Souvannarath - 10% Shawn Souvannarath - 10% The Company of the Company		e LLC are redistributed with	the removal of Bryan	ı Learned.		
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Shawn Souvannarath - 10% The Company of the Compan	Jaime Velez - 30%					
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Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

workspace Solutions, LLC			
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)	
The Articles of Organization for this Limited I Florida document number 1.06000042098	Liability Company were filed	on April 24, 2006	_ and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compa	uny here:	
The new name must be distinguishable and contain the	words "Limited Liability Company,	"the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE.	ET_ADDRESS)	ن تات ـــــــــــــــــــــــــــــــــــ	202
)(007 21
Enter new mailing address, if applicable:		ار ماران ماران	(CO)
Mailing address MAY BE A POST OFFICE	<u></u>	min Tu	N 13
		<u> </u>	59
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on ess here:	our records, <u>enter the name o</u>	f the new register
Name of New Registered Agent:	James Learned		
New Registered Office Address:	950 Charles St., Unit 108		
-	Far	er Florida street address	
	Longwood	, Florida <u>32750</u>	
	City		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 hanging 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	Bryan Learned	no fixed address	LJAdd
			≡ Remove
			□Change
AMBR	Shawn Souvannarath	301 Clydesdale Gircle	= Addi
		Sanford, FL 32773	□Remove
			26 350 1A1
			200 OCT REPORT OF THE PROPERTY
			Change 7
		_	
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			□ Change
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			□ Change
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Filing Fee: \$25.00