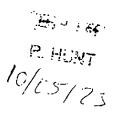
## L09000071826

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(Address)	
(Address)	
(City/State/Zip/Phone #)	
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Date:1	0/05/2023	
Name:	Xavian Brown	
Reference #:_	2146004	
		HOSPITALITY LLC
☐ Articles	of Incorporation/Authoriza	ation to Transact Business
✓ Amendr	ment	
☐ Change	e of Agent	
Reinsta	tement	
Conver	sion	
☐ Merger		
Dissolu	tion/Withdrawal	
☐ Fictitiou	s Name	
✓ Other	Please pro	ovide certified copies upon filling
Authorized Am	nount:\$55.00	
Signature:	×Pm-	

F: +852.2682.9790

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRUST HOSPITALITY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 07/27/2009 The Articles of Organization for this Limited Liability Company were filed on and assigned L09000071826 Florida document number 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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	Paul Womble	545 E. John Carpenter Freeway	⊒ Add
		Suite 1400	⊡ Remove
		Irving, TX 75062	Change
AMBR	Rickey D. Whitworth	545 E. John Carpenter Freeway	
		Suite 1400	⊡ Remove
		Irving, TX 75062	☐ Change
AMBR	Richard Millard	275 Alhambra Circle	⊡ Add
		Coral Gables, FL 33134	28 23 21 21 22 22 22 22 22 22 22 22 22 22 22
		<u></u>	Change
AMBR	Michael Register	275 Alhambra Circle	☐ Change
		Coral Gables, FL 33134	E Pemove
			Change
			⊡ Add
		<del></del>	
		<del></del>	□ Add
			Remove
			Change

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(If an effective date is Note: If the date i	other than the date of listed, the date must be speci nserted in this block does we date on the Departmen	fic and cannot be prior to da not meet the applicable	ite of filing or more than 90 day	(optional) s after filing.) Pursuant to 605.0. s, this date will not be listed	207 (3) as the
	fies a delayed effect after the record is f		n effective time, at 12:	:01 a.m. on the earlier	of:
Dated	October 5				
		/s/ Michael f			
	Signature	e of a member or authorize	d representative of a member		

Page 3 of 3

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