Page: 2 of 6

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:			· ·	Ū.
	Division of Cor	rporations	<u>{</u>	
	Fax Number	: (850)617-6383		- :
			# * I *	- (
From:			:	
	Account Name	: COGENCY GLOBAL, INC.		ÇÇ
	Account Number	: 120000000088		
	Phone	: (800)221-0102		
	Fax Number	: (800)944-6607		درا
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ODYSSEY ENGINES, LLC

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Ta:

COVER LETTER

TO:	Registration Sec Division of Corp			
ALIN 111	Odyssey En			
SUBJE	СТ:	Name of Limi	ted Liability Company	
The end	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please 1	eturn all correspo	ndence concerning this matter	to the following:	
		Steven L. Glauberman		
			Name of Person	
		Becker & Poliakoff LLP		
		-	Firm/Company	
		45 Broadway, 17th Floor		
			Address	
		New York, NY 10006-370	8	
			City/State and Zip Code	
		sglauberman@beckerlawye		
		E-mail address: (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please of	all:	
Steven	L. Glauberman		at ()	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$2:	5.(X) 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 OF

To:

Odyssey Engines, LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed of Florida document number $\frac{L10000003257}{L1000000000000000000000000000000000000$	n 1/11/2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	nv 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)	<u> </u>
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 registered agent and/or the new registered office address here:	ss on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address: Ente	er Florula street address
	, Florida
City	Zıp 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 Changing Registered Agent, Signature of New Registered Agent

From: Jacqueline Almeida Fax: 18002210102 To: Fax: (850) 617-6383 Page: 5 of 6 09/18/2019 12:05 PM

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Richard Gonzales	8050 NW 90th Street	
		Medley, FL 33166	
	ford Dhoras	40 Walker Street, Apt 5	Change
MGR	Joel Plasco	40 Walker Street, Apr 2	
		New York, NY 10013	Remove
			Change
			Remove
			Change
			o. o. Add
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Effective date,	if other than the	date of filing:	mail or the distance of filling over the	(optional) nore than 90 days after filing.)	Pursuant to 605.0
Note: If the dat	e inserted in this blo	ck does not meet the a	pplicable statutory film	g requirements, this date v	ill not be listed
document's effe	ctive date on the De	partment of State's rec	cords		
the record spe) The 90th di	ecities a delayed ay after the reco	effective date, bu ord is filed.	it not an effective i	ime, at 12:01 a.m. c	in the earlier
Septemb	er 18	2019			
Dated		, 2019	<u> </u>		
	/s/ Ste	even L. Glauberma	n		
		Signature of a member of	II r authorized representative	of a member	

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Typed or printed name of signee

Filing Fee: \$25.00