

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:	Division of Corporations Fax Number : (850)617-6383					
	From:	Account Name : MACFARLANE FERGUSON & MCMULLEN Account Number : 076077001654 Phone : (813)273-4229 Fax Number : (813)273-4396					
3: 14]	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: <u>Flar Hampa@MacFar. Comp</u> <u>Email Address: Flar Hampa@MacFar. Comp</u> LLC AMND/RESTATE/CORRECT OR M/MG RESIGN</pre>						
2021 NOV 30 PH	AT ARANG T	STRATEGOS PUBLIC AFFAIRS, LLC Certificate of Status 0 Certified Copy 0 Page Count 0 Estimated Charge					

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

♠(FAX)

	BLIC AFFAIRS, LLC	
(Name of the Limited Liability Comm (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on June 28, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<u>vility company here</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	4400 W. Culbreath Avenue	
(Mailing address MAY BE A POST OFFICE BOX)	Татра, FL 33609	

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:

				8	
Name of New Registere	d Agent:			NON	
New Registered Office /			in: SSN	130	
<u> </u>	Enter Florida street o	address		~	-60
		_, Florida _			
	City		Zip Col	5	
	Enter Florida streët o		ZipZeal	PH 12 48	•

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added (((H2014)) records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
Member	Anthony Trey Traviesa	4320 W. Kennedy Boulevard, Suite 200	🗆 Add
		Tampa, FL 33609	ERemove
			□Change
MGR	Adam Giery	4400 W. Culbroath Avenue	🖬 Add
		Tampa, FL 33609	🗆 Remove
			□Change
<u></u>	·	<u> </u>	
			🗆 Remove
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		<u> </u>	🗌 Remove
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			Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the (If an effective date is listed, the date must <u>Note:</u> If the date inserted in this ble document's effective date on the De	ock does not meet the application	to date of filing or more than 90 able statutory filing requiren	(optional) days after filing.) Pursuant to tents, this date will not be l	605.0207 (3)(listed as the
e record specifies a delayed effective ord is filed.	e date, but not an effective th	ne, at 12:01 a.m. on the ear	fier of: (b) The 90th Cay a	lftc e
				NON
Dated November 30	, 2021	<u> </u>	SSI SSI	N 30 PI
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·	Signature of a momber of surface	rized representative of a memb		PH 12: 48
James W. Goodwin, Esq	uire, Authorized Representat	rive		60
		d name of signee		

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