5/18/23, 3:54 PM

Division of Corporations

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d I Abilia Comos	av as it now appears on our record	(h.)
The Articles of Organization for this Limited Lin Florida document number <u>L12000</u>	ability Company 32.734	•	2012 and assigned
The Articles of Organization for this Limited Liability Company were filed on 3/7/20/2 and assigned florida document number L12000032.734  This amendment is submitted to amend the following:  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 "L.C" or the abbreviation "L.C."  Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)			
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."
<del>-</del>			102 11.
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	8 <i>0X</i> )		6
B. If amending the registered agent and/or re agent and/or the new registered office addres	egistered office <u>a here</u> :	address on our records, <u>ente</u>	the name of the new registeres
	<u>Lisa</u> 303		
		City	lorida <u>333/5</u> Ztp Code
New Registered Agent's Signature, if changing R	ceorderen Apent:		

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 or removed from our records:

MGR = Mar AMBR = Aut	ager horized Member		
Title	Name	Address	Type of Action
Mga	Churlise Stallworth	3324 W. Broward Blod.	
$\mathcal{U}$		Ft. Caududale, FL3331	<u> </u>
			[] Change
Mtg	Nicholas Point Dugour	5612 Hellywood Blad Hollywood FC 33021	XAdd
V	V	Hollyword FC 33021	□R±move
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If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
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Note: I	te date, if other than the date of filing:  (optional)  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 505.0207 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
ne record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated_	5/18/ 3023
	Signification of authorized representative of a member
	Chandy Point Du Jour