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COVER LETTER

Division of Corporations
SUBJECT: The Wright Way Innovations LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Monica S. Smith
The Wright Way I
241 Birkdale Drive
Daytona Beach Fl. 32124 City/State and Zip Code
E-mail addless: (to be used for future annual report notification)
For further information concerning this matter, please call:
Monitor Smith at (386), 880-3776 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount: Second Second

MAILING ADDRESS:

Registration Section

TO:

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

(Name of the Limited)Lia	nility Company as if now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	7/2/2012
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the life FOCUS 365 L. L. C. The new name must be distinguishable and contain the words "I	imited liability company here: Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD	Daytona Beach Fl. 32124
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	241 Birkdale Orive Daytona Beach, Fl. 32124
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	tonica S. Smith (Same)
New Registered Office Address:	Enter Florida street address
<u>Ī</u>	Daytona Beach Florida 32124 Zip Code
Now Designand Asset's Cinnature if shanning Design	and Agent

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>	Address	Type of Action
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Effective date, if other than the date of filing: December 10, 2017 option	nal)	. !
I an effective date is listed, the date must be specific and cannot be prior to date of filing or more tMan 90 days after fi	iling.) Pursuant to 60	15.0207 and as
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ne record specifies a delayed effective date, but not an effective time, at 12:01 a. The 90th day after the record is filed.	m. on the ear	iei oi
November 27 2017		
Dated November 27. 2017.		
Dated November 27. 2017.		
MIgneca S. In th.	a-110	
Dated November 27. 2017. Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00