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DATE:

8/11/21

NAME:

TRUEMONT, LLC

TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRUEMONT, LLC					
(Name of the Li	nited Liability Comp (A Florida Limited	any as it now appears on our records. Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on 05/01/2013			and assigned		
Florida document number L13000063795					
his amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
he new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "LLC" o	or the abbreviation "L.L.C."		
Enter new principal offices address, if appl		17 SE 24TH AVE	20;		
Principal office address MUST BE A STRE		2ND FLOOR			
		POMPANO BEACH FL 33062	A.S. E		
			5,4		
nter new mailing address, if applicable:		17 SE 24TH AVE			
Mailing address MAY BE A POST OFFICE					
		POMPANO BEACH FL 33062	- F		
3. If amending the registered agent and/or gent and/or the new registered office address.	coa nei e.	address on our records, enter the			
Name of New Registered Agent:	FREDERIC BA	KIHEPA			
New Registered Office Address:	17 SE 24TH AV	/E. 2ND FLOOR			
		Enter Florida street address			
	POMPANO BEACH . Flor		ida 33062		
one Danistanud American		City	Zip 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

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
MGR	GENS D PROPERTIERS LLC	3850 SW 87TH AVE	
			DAdđ
		SUITE 301	≣Remove
		MIAMI FL 33165	DChange
			□Add
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Effective date, if other than	n the date of fi	ling:			_ (optional)		
If an effective date is listed, the da Note: If the date inserted in t	his block does no	ot meet the appl	icable statutor	v filing requireme	ays after (iling.) Pu ints, this date wil	irsuant to 6 I not be li	,05.02 isted
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AUGUST 11 Dated	/_	2021	<u>.</u> .				
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