## 13000/45/20

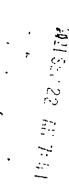
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PICK-UP	WAIT	MAIL
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## **COVER LETTER**

TO:		on Section f Corporations			
SUBJE		rust LLC			
SUBJE	CI:	Name of Limited Liability Company	_		
The enc	losed Art	es of Amendment and fee(s) are submitted for filing.			
Please re	eturn all c	respondence concerning this matter to the following:			
		Hene Knable Gotts, Esq.			
Name of Person					
c/o Wachtell Lipton Rosen & Katz Firm/Company					
		Address			
		New York, NY 10019			
		City/State and Zip Code			
		E-mail address: (to be used for future annual report notification)	<u> </u>		
For furtl	her inform	ion concerning this matter, please call:			
Hene Go	otts	917-513-8805			
	_	ame of Person Area Code Daytime Telephone Nu	mber		
Enclose	d is a che	for the following amount:			
■ \$25	.00 Filing	Certificate of Status Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)		
	Mailing	ddress: Street Address: Depictration Section			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1910 Trust LLC

182 22 AN 7141

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 22, 2014 and assigned Florida document number <sup>L</sup> 13000145120 This amendment is submitted to amend the following: A. 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 "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## 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 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 (21, 62, 22, 54, 7:41	Type of Action
MGR	Michael D. Gotts	50 West 87th Street, Apt 1, NY, NY 10024	□Add
			Remove
			□Change
MGR	Hene Knable Gotts	50 West 87th Street, Apt 1, NY, NY 10024	<b>≅</b> Add
			□Remove
			□Add
			Remove
			□Change
			□Add
			□Remove
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ffective date, if other than the date of fil	ing: (option and cannot be prior to date of filing or more than 90 days after file	al)
an effective date is listed, the date must be specific Sote: If the date inserted in this block does no	and cannot be prior to date of filing or more than 90 days after till t meet the applicable statutory filing requirements, this d	ing.) Pursuant to 605.02 ate will not be listed
ocument's effective date on the Department of	f State's records.	
	not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after th
d is filed.		
Sentember 16	2021	
Dated	_,	
Dated September 16  Mills Signature of	hats	
Signature o	a member or authorized representative of a member	<del></del>

Filing Fee: \$25.00