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(Re	questor's Name)	
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COVER LETTER

TO: Registration Sec Division of Corp			
Jade 2405, L	LC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of /	Amendment and fec(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
	Jacobo Waisburd Kleiman		
	,	Name of Person	
		Firm/Company	
	Paseo de los Laureles 268-5	53	
		Address	
	Dosques de las Lomas, Me	xio, D.F., 05120 Mexico	
		City/State and Zip Code	
	jwaisburd@walworth.com.n		- idialah
For further information c	E-mail address: (I oncerning this matter, please ca	o be used for future annual report t	guntauom
Jordan Vitek		605 799-1599 at ()	<u> </u>
Name o	f Person	Area Code Day	time Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

1.5

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tailahassee, FL 32314

Street Address:
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

Jade 2405, LLC

2. 1. 110 - 2: 57

(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 L	Jability Company w	vere filed on	and assigned
Florida document number	·		
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name o	of the limited liabili	ity company here	:
N/A			
The new name must be distinguishable and contain the v	words "Limited Liability	y Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or i	rogistored office ad	ldress on our rece	ande antan the name of the new registers
agent and/or the new registered office addre		idiess on our reco	inds, enter the name of the new registered
Name of New Registered Agent:	<u>N/A</u>		
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the	oer and complete p istered agent as pr	erformance of m ovided for in Ch	oduties, and I am familiar with and upter 605, F.S. Or, if this document is
company has been notified in writing of this			y

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	Jaobo Waisburd Kleiman	Paseo de los Laureles 268-53	= Add
		Dosques de las Lomas, Mexio, D.F., 05120 Mexico	
			□Change
MGR	Titan Management, LLC	200, N. Phillips Ave. Suite 301	□Add
		Sioux Falls, SD 57104	≅Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
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ffective date, if other than (N/A		(optic	onal)
an effective date is listed, the date solution of the date inserted in this ocument's effective date on the	block does not meet the	e applicable statuto	ng or more than 90 days after	filing.) Pursuant to 605.0207 (3
record specifies a delayed effect is filed.	ctive date, but not an effe	ective time, at 12:0	l a.m. on the earlier of: (b	The 90th day after the
Dated July 16th,	202	l		
	· · · · · · · · · · · · · · · · · · ·	·		

Typed or printed name of signee