L14000172359

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T. MATTHEWS MAR - 2 2022

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	THEHOVED FOR Name of Limit	Awhile U	<u> </u>			
The enclosed Article	es of Amendment and fee(s) are subm	nitted for filing.				
Please return all con	respondence concerning this matter to	o the following:				
	Andrea	Green				
	Anchor	Name of Person Ped for AW Firm/Company	hile LLC			
	904 SE					
		Address				
	_ Fort Lan	derdale, FL City/State and Zip Code	33316			
		d Crew@gma				
	E-mail address: (t	o be used for future annual report noti	fication)			
For further informa	tion concerning this matter, please ca	all:				
Pndre	a Green	at (454) 235 Area Code Daytim	0589			
N	ame of Person	Area Code Daytim	e Telephone Number			
	for the following amount:	F	Control on Piling Con			
□ \$25.00 Filing F	See \$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)			
Division P.O. Box	tion Section of Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on 2/14/22 and assigned Florida document number <u>L14000172359</u> 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: Andrea Green Name of New Registered Agent: New Registered Office Address:

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

Enter Florida street address

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>	Name	Address	Type of Action
MGRM	(USRY CIVERN	904 SE 144 (+	XAdd
		Ft Landerdale, FL	□Remove
		33316	□Change
MGRM	Alice Kmetz		□Add
			Remove
			□ Change
MARM	area Kmetz		□Add
	-		Remove
			□Change
			□Add
			Remove
			□ Change
			🗆 Add
			□ Remove
			□Change
			□Add
			□Remove
			Change

. If amending any other	r information, enter change(s) here: (Attach addition	nal sheets, if necessary.)	
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(If an effective date is listed, Note: If the date inserte		applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 60 requirements, this date will not be list	
the record specifies a delay cord is filed.	red effective date, but not an effe	ective time, at 12:01 a.m. o	n the earlier of: (b) The 90th day aft	ler the
Dated 2 4	. 20)22.		
	Avana)	or authorized representative of	of a member	
	Andrea (TPPP or printed name of signee		