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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH OF BOCA RATON

Account Number : 076376001555 Phone : (803)255-9617 Fax Number : (561)483-7321

The the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

없 문 문 문 문 E E E E E E E E E E E E E E E	Address:_	joanorthwein@gmail.com	
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

DIO DANCII LLC

	Imited Liability Company as it now (A Plorida Limited Liability Com	nppenes on que records.)
The Articles of Organization for this Limite Florida document number L14000175500	d Liability Company were filed	
This amendment is submitted to amend the f	following:	
A. If amending name, enter the new лаш	e of the limited liability compa	ny here:
The new name must be distinguishable and contain the	ie words "Limited Liability Company,	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if app	licable:	
Principal office address MUST BE A STR.	EET ADDRESS)	
Cater new mailing address, if applicable:		
0 , 1,	<u> </u>	
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Mailing address MAY BE A POST OFFIC	registered office address on o	
Mailing address MAY BE A POST OFFIC	registered office address on o	
Mailing address MAY BE A POST OFFIC If amending the registered agent and/orent	registered office address on o ress here: Joan K. Orthwein 543 Palm Way	ur records, <u>enter the name of the new registe</u>
Mailing address MAY BE A POST OFFICE. If amending the registered agent and/orgent and/or the new registered office address Name of New Registered Agent:	registered office address on o ress here: Joan K. Orthwein 543 Palm Way Enter	ur records, enter the name of the new registe
gent and/or the new registered office addr Name of New Registered Agent:	registered office address on o ress here: Joan K. Orthwein 543 Palm Way	ur records, <u>enter the name of the new registe</u>

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

Fax Audit No. H23000441363 3

If amending Authorized Person(s) authorized to manage, enter the fille, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Nume	Address	Type of Action
MGR	Joan K. Orthwein, Co-Trinstee of Percy J. Orthwein, Il Revocable Trust dated 3-11-03, as amended	543 Palor Way	□∧dd
		Gulf Stream, FL 33483	□Remove
			\(\exists Cliange
MGR	Kniherme B. Orlhwein, Co-Trustee of Percy J. Orlhwein, II Revocable Trust dated 3-11-03, as amended	543 Palm Way	D\dd
		Gulf Stream, FL 33483	DRemove
			= Change
MGR	Percy J. Orthwein	543 Palm Way	DAdd
		Gulf Stream, FL 33483	ØRemove
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an eft ote:	ive date, if other than the date of filing: (optional) (octive date is listed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Poissant to 605.0207 (3)(b) If the date inserted in this black does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
	November 30, 2023 Kattu B. attler
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