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(Cit	ty/State/Zip/Phone	: #)
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COVER LETTER

TO: Registration So Division of Co	ection rporations	•		
SUBJECT:	Ex NO	ited Liability Company		
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	<u>Jon</u>	athan Wass	serman	
	***************************************	Firm/Company		
	4903	Midrown Ln	, uniT 3210_	
	Palm B	each Gardens,	FL 33418 E	8 AUG -
	F-mail address: (Pwas Scrman (3) g m	iai\.com	ai ω m mi ≩ □
Division of Corporations Exposed LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. T				
Name o	of Person	Area Code Daytin	e Telephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee		Certified Copy	Certificate of St Certified Copy	atus &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Exn	ovo,LLC
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) limited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number	mpany were filed on $4 - 32 - 15$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ASSEL FLORDA
3. If amending the registered agent and/or register egistered agent and/or the new registered office addresses.	ered office address on our records, <u>enter the name of the new</u> ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
Com Danistonad Amare's Cianatana if shanaing Danistonad (A

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 by removed from our records:

or removed from our records:		
MGR = Manager		
AMBR = Authorized Member		

<u>Title</u>	Name	Address	Type of Action
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		Leesburg, Va. 2017	6 Remove
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			Change

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	Dated	August, 151, 2018.
Signature of a member or authorized representative of a member		
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		Jonathan Wasseman Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00