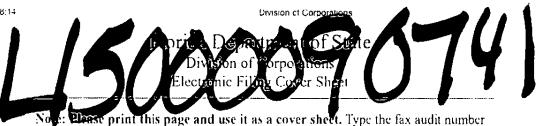
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GOYENECHEA PROFESSIONAL SERVICES LLC

Account Number : I20190000078 : (561)341-1582 Fax Number : (561)264-6286

Enter the email address for this business entity to be used for future $\frac{2\pi}{2}$ annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HEARTSUP, LLC

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MAR 13 2024

From: +15612646286 (Fax.Plus)

		i	COVERLETTER	
TO:	Registration Se Division of Cor	porations	ž*	ý Y
SUBT	ECT;		rsup, elc	
30113			ited Liability Company	
The en	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			PABLO E GOYENECHEA	
			Name of Person	
		GOYENEG	CHEA PROFESSIONAL SERV	ICES LLC
			Firm/Company	
		3175	S CONGRESS AVE, SUITE 30	5-C
			Address	
		PALN	M SPRINGS, FLORIDA 33461	
			City/State and Zip Code	
			admin@gpscontador.com	
For the	ther information c	iz-mail address: (oncerning this matter, please c	to be used for future annual report it all:	olification)
		GOYENECHEA	561	341-1582
	Name o	f Person	at ()	ime Telephone Number
Enclos	ed is a check for th	ne following amount:		
F \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	Mailing Addres	s:	Street Address:	
Registration Section			Registration S	Section
Division of Corporations P.O. Box 6327			Division of C The Centre of	
	Tallahassee. I			roe Street, Suite 810
			Tallahassee, I	FL 32303

To: +18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HE	ARTSUP, LLC				
(Name of the Limited Liability (A Florida	y Company as it now appears of Lunded Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Co	ompany were filed on	05/21/2015	and a	ssigned	
Florida document number L15000090741	- '				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ed liability company here	:			
The new name must be distinguishable and contain the words "Limit	led Liability Company," the desi	gnation "LLC" or the a	abbreviation "	L.I. C."	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRE	<u> </u>				
Enter new mailing address, if applicable:				2	_
(Mailing address MAY BE A POST OFFICE BON)			112	- 52	_
			-,	HAR	
B. K. D. H. C. L. W. C. L.	ć" II	a .a .al	6.1		,
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our rec	oros, <u>enter the nar</u>	ne or the no		
			경유	7	
Name of New Registered Agent:	GPS CO	NTADOR LEC	71S		_
New Registered Office Address:	3175 S CONGRE	ESS AVE, SUITE 30:	5-C 기기	6	
	Enter Floride	r street address			
	PALM SPRINGS	Florida	33461	,	
	Cuv		Zw Code	•	

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.

Pablo E Goyeuechea

If Changing Registered Agent, Signature of New Registered Agent

_ 🗆 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 = M $AMBR = A$	lanager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
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			□Add
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		**********	□Add
		2000	□Remove
			☐ Change
			□Add
			□Remove

From: +15612646286 (Fax.Plus)

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(If an effective d Note: If the	te, if other than the date of are is listed, the date must be speci date inserted in this block does (Tective date on the Departmen	fic and cannot be prior not meet the applica	to date of filing or more	(optional) than 90 days after filing. requirements, this date) Pursuant to 605 0207 (will not be fisted as th
he record speci ord is filed.	fies a delayed effective date, b	ut not an effective tir	me, at 12:01 a.m. on	the earlier of: (b) The	e 90th day after the
Dated	March 11th	2024			
		Mauricio en la member or autho	Gattah		
	Signatur	e of a member or autho	representative of	a member	u.a.e.