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(((H230003591693)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FOLEY & LARDNER Account Number : I19980000047 Phone : (407)423-7656

Fax Number : (407)648-1743

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

Email Address:

RCaron@foley.com

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SHARIFIME HOLDINGS, LLC.

H23000359169.3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited)	Liability Compa Florida Limited I	iny as it now appears on a	ur records.	
The Articles of Organization for this Limited Liabi Florida document number 1.15000094632	ility Company	were filed on	2015	and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liab	ility company here:		
The new name must be distinguishable and contain the word	s "Limited Liabi	lity Company," the designa	nion "LLC" or the ab	breviation ELL.C."
Enter new principal offices address, if applicabl	le:	5337 Millenia Lakes	Blvd, Suite 225	
(Principal office address MUST BE A STREET)	(DDRESS)	Orlando, FL 32839		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5337 Millenia Lakes Orlando, FL 32839	Blvd, Suite 225	2: 0.1
B. If amending the registered agent and/or registered office address based of the new registered office address based of the new registered office address based on the new registered of the new registered of the new registered of the new registered of the new registered agent and/or registered agent		address on our recor	ds, <u>enter the nam</u>	e of the new regis
Name of New Registered Agent:	Bert Blicher			
New Registered Office Address:	5337 Millenia	Lakes Blvd, Suite 225		
		Enter Fiorida st	reet address	
	Orlando		Florida	839
		Cin		Zip 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.

But Blich

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>	Name	Address	Type of Action
MGR	Nesoi Partners LLC	5337 Millenia Lakes Blvd, Suite 225	= Add
		Orlando, FL 32839	□Remove
			[]Change
Authorized Representative	Bert Blicher	53.37 Millenia Lakes Bivd, Suite 225	■Add
		Delray Beach, Fi. 33446	□Remove
			Change
MGR	Jason Connolly	5406 Hoover Bivd., Ste. 5	
		Orlando, FL 32839	■Remove
			□ Change
····			DAdd
			Z Romove
			□Change
		□Add	
			C.Remove
			□Change
			
			□Remove

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Effective date, if other than the officetive date is listed, the date in Note: If the date inserted in this document's effective date on the	hlock does no	and cannot be pri at meet the app	licable statutory	g or more than 90 filling requirem	(optional) days after filing.) Purents, this date will	isuant to 605,0201 not be listed as
ne record specifies a delayed effectord is filed.	ive date, but i	not an effective	e time, at 12:01	a.m. on the earl	ier of: (b) The 90	Ith day after the
Dated October 12		2023	· ·			
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