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| | Division of Corporations | - |
| | Fax Number : (850) 617-6383 | 7 |
| From: | | • |
| | Account Name : TAMLEAF.COM INC | 2 |
| | Account Number : T20140000084 | - |
| | Phone : (305) 541-3980 | |
| | Fax Number : (888)772-8198 | - |
| ter the en | wail address for this business entity to be used faport mailings. Enter only one email address pleas | or fut |
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WY 20 2017 HARRIS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3 GEMS DESIGN LLC

| (Name of the Limited Liability (A Florida | Company as it now appears on our Limited Liability Company) | records.) | | |
|---|--|--|------------------------------------|----------------------------|
| The Articles of Organization for this Limited Liability Co Florida document number <u>L16000225020</u> | ompany were filed on 12/08/20 | 16 | and assign | ied |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limit | ed liability company here: | | | |
| 3 GEMS ARCHITECTURE LLC | | | | |
| The new name must be distinguishable and end with the words "Lin | nited Liability Company," the designation | on "I.I C" or the a | ibbreviation "L.L. | C." |
| Enter new principal offices address, if applicable: | | | | |
| (Principal office address MEST BE A STREET ADDRI | 588) | | | |
| | | | | |
| Enter new mailing address, if applicable: | 616 CLEARWATE | R PARK RD | | |
| (Mailing saddress MAY BE A POST OFFICE BOX) | STE 906 | | | |
| | WEST PALM BEA | CH, FL 3340 | l | |
| Name of New Registered Agent: New Registered Office Address: | Emer Florida street | achtress | | |
| | 7 | | | |
| | City | , Florid# | Zsp Cindo | |
| New Registered Agent's Signature, if changing Registered | Agent: | | | |
| I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and coacept the obligations of my position as registered agheing filed to merely reflect a change in the registered company has been notified in writing of this change. | omplete performance of my dut vent as provided for in Chapter | ies, and Lam _. 605, F.S. Or, | familiar with i . if this docum | and ent is |
| | If Changing Registered Agent, Sign | nature of New Re | eniztered Vacut | |
| | Page 1 of 3 | | | ア ペ ソ ン エ エ |
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To: Page 5 of 6

MGR = Manager

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

| <u> Title</u> | Name | Address | Type of Action |
|---------------|--------------------------|--------------------------|---------------------|
| AMBR | MARTESKI, JEFFREY THOMAS | 616 CLEARWATER PARK ROAD |) STE 906 _■ ∧dd |
| | | WEST PALM BEACH, FL 3340 | 1_□ Remove |
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Page 2 of 3

| . If amending any other information, enter cha | ange(s) here: (Attach additional sheet) | s, if necessary) |
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| Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department | of receipt or filed date and cannot be more than of State) | 1 90 days after |
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| ARITRA | 1 72 | , |
| ARITRA Signature of a co | RUN KRA WEE | , , , , , , , , , , , , , , , , , , , |

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