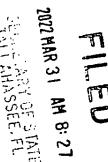
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: EARP SCIER HOLDINGS LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
DERECEA PATTERS ON Name of Person
BURN BOOT CAMP TACCATHASTER
1921 WATTALAW CT Address
TAZIAHASSEE FZ 32301 City/State and Zip Code
City/State and Zip Code  BECH PATERSON & BURNBOOT CAMP. COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PERSON at (850) 728 - 848 4  Name of Person Area Code Daytime Telephone Number
Anclosed is a check for the following amount:    S25.00 Filing Fee   \$30.00 Filing Fee & Certificate of Status   Certified Copy (additional copy is enclosed)   Certified Copy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABAMAS MARS The Articles of Organization for this Limited Liability Company were filed on \_ Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida 32'50|
Zin 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.

> 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
MER	BAMBI GANT	9013 SHOAL CROOK DR	□Add
		TAWAHASSEE FL 32312	Remove
			Change
MGR	PEBELLA PATTERSON	1 AZI WAHAZAW CI	<b>J</b> dd
		TALLAMASTE FL 32301	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
		<del></del>	□Adđ
			□Remove
			□Change
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Note:	tive date, if other than the date of filing:
e reco rd is f	ord 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 filed.
Dated	3MARCH 31 2022.
	The Asia State
	Signature of a mourber or authorized representative of a member

Filing Fee: \$25.00