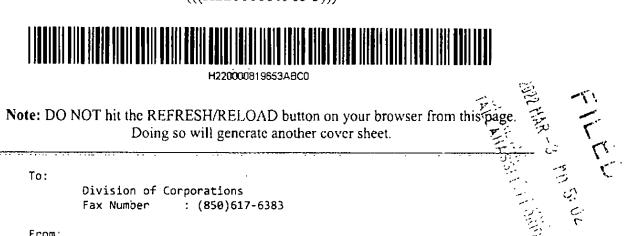
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TEMS INVESTMENTS LLC

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K. SALY

## ARTICLES OF AMENDMENT **TO** ARTICLES OF ORGANIZATION OF

FILEL
2022 HAR -3 PH 5: 02
TALLAHASSELLLORID.

TEMS INVESTMENTS LLC			
(Name of the Limited	Liability Company as Florida Limited Liabil	it now appears on our records.) ity Company)	
The Articles of Organization for this Limited Liab		e filed on	and assigned
Florida document number £17000107474	<del></del> .		
This amendment is submitted to amend the follow	•		
A. If amending name, <u>enter the new name of t</u>	he limited liability	company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability C	ompany," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS) _		
<del></del>	_		
Enter new mailing address, if applicable:	· · ·		
(Mailing address MAY BE A POST OFFICE B	<u>ox</u> )		
	_		
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office add here:	ress on our records, <u>enter th</u>	coname of the new registr
	•	•	
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street address	
		Flor	-i 1a
		City	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.3. 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.

03/04/2022 16:00 3052201440 LAZARUS CORPORATE PAGE 03/04

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>	<u>Name</u>	Address	Type of Action
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		MIAMI FL 33165	■Remove
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Effective date, if other than I of an effective date is listed, the date Note: If the date inserted in this document's effective date on the	nust be specific an block does not	ig: id cannot be prio meet the appli			optional) after filing ) Purs , this date will	ouant to 605,0207 (2 not be listed as th
record specifies a delayed effec	tive date, but no	et an effective i	ime, at 12:01 a	m, on the earlier o	f: (b) The 90t	h day after the
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