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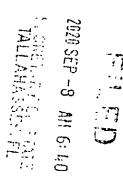
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COVER LETTER

TO: Registration So Division of Co		- 3	•
SUBJECT:	Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Shelly Aristizabal Name of Person Cinchit LLC Firm/Company 23 lb Pine Radge Pd*3333 Address Name of Person City/State and Zip Code Helly Company City/State and Zip Code Helly Company Area Code Daytime Telephone Number Area Code		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Shell	1 Aristizal	sal
	Cin	chit LL	<u>C</u> '
	2316 P		¥333
	Nuples	FL 3410°	1
	E-mail address: (P the cinch	ication)
For further information	concerning this matter, please c	all:	2920 5-20 TA
Shelly A	nst Zerbul	at 23 9 777	n,
• "		Area Code Dayting	
		START OF THE P	
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 10 4 2017 and assigned
Florida document number 117000205884
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:
A. If amending name, enter the new name of the ninted habitty Company nere.
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
The new haine this ite distinguishable and contain die words. Entitled Entonity Company, the designation Time of the doorevlation Time.
Enter new principal offices address, is applicable: (Principal office address MUST BEZ STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A)POST OFF (CE!BOX), 3 3 11 (S)
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
City ;: Zip Gode

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.

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>	<u>Address</u>	Type of Action
MBR	Shelly Aristizatul	2316 Pine Ridge Rd 333	□Add
	•	Nuples, Fr 34109	□Remove
	•		Change
MUR	Keith Wexler	16054 Fainny Cir	
		WOSHIN, FZ 33326	□ Reπюνе
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		AE A	☐ Remove
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fective date, if other than the date of filing:	605.0207
ste: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be current's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	ifter the
is filed.	
acd September 4 2020	
When Solly Under	
Signature of a member or audiorized representative of a member	
Keith Wexler Shelly Aristizabal	