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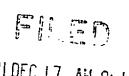
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COVER LETTER

TO: Registration So Division of Cor					
*** * * * * * * * * * * * * * * * * *	MULTICORP, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Name of Person	 		
		Name of Ferson			
	The A.A.R. Trust				
		Firm/Company			
	7512 Dr Phillips Boulevar	d, Suite 50-507			
		Address			
	Orlando, FL 32819				
		City/State and Zip Code			
	jwirth@kwonwirthlaw.com				
	E-mail address: (to be used for future annual report n	otification)		
For further information of	concerning this matter, please c	ali:			
Joseph Wirth		407 930-5050 at ()			
Name o	of Person	Area Code Days	time Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addre		<u>Street Address:</u> Registration S			
Registration Section Division of Corporations		_	Division of Corporations		
P.O. Box 63:	27		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



AURUM MULTICORP, LLC

(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 12/11/2017 and assigned Florida document number $\frac{1.17000252918}{}$ 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 "LLC." 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 regis agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 wi 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 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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	THE JARGLG TRUST	7512 DR PHILLIPS BOULEVARD	□Add
		SUITE 50-507	≡ Remove
		ORLANDO, FL 32819	
MGR	The A.A.R. Trust	7512 DR PHILLIPS BOULEVARD	= Add
		SUITE 50-507	□Remove
		ORLANDO. FL 32819	
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

			<u> </u>
		-	
Effective date, if other than the office (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applic	able statutory filing requi	(optional) 190 days after filing.) Pursuant to 605.026 rements, this date will not be listed a
he record specifies a delayed effective ord is filed.	date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day after th
December 10	2021		
1 Devil	Signature of a member or auth	_	
ושמו ליש אנגניוניגו			

Typed or printed name of signee