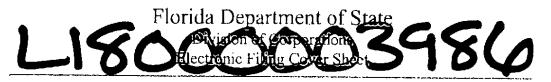
8/19/22, 9:53 AM

Division of Corporations



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From:

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Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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

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Help

AUG 22 2022 K. Brumbley

To:

ARTICLES OF AMENDMENT TO.. ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now appears on ou (A Florida Limited Liability Company)	r records.)
	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited I Florida document number $\frac{1.18000003986}{1.18000003986}$		and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company." the designati	on "LLC" or the abbreviation "LLL.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
B. If amending the registered agent and/or		s, enter the name of the new egistere
ngent and/or the new registered office addre	ess nere:	₹
Name of New Registered Agent:	1448 HOLDINGS INC.	
New Registered Office Address:	1448 SE LITH STREET	
	Enter Florida stre	ret address
	FORT LAUDERDALE	Florida 333165

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.

Ciiy

If Changing Registered Agent, Signature of New Registered Agent

Lip Code 🚮

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
AMBR	JOHN AARON	18101 COLLINS AVE	□Add
		SUNNY ISLES, FL 33160	≣Remove
AMBR	1448 HOLDINGS INC.	1448 SE 13TH STREET	■Add
		FORT LAUDERDALE, FL 33316	□Remove
			□Change
			□Add
			[]Remove
			[]Change
			🖸 Add
			□Remove
			☐ Change
			□Abb
			□Remove
			bbAC
			□Remove
			□Change

	nending any other information, o	enter emage(e) ner	(.Artie) tidamonai sir	ceis, if necessury.	
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Note:	tive date, if other than the date of flective date is listed, the date must be spe If the date inserted in this block do ment's effective date on the Departme	es not meet the applica	to date of filing or more than table statutory filing require	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605.0207 (3)(t listed as the
If the record is f	rd specifies a delayed effective date, iled.	but not an effective tis	ne, at 12:01 a.m. on the ea	arlier of: (b) The 90th day i	after the
Dated	8/18	2022			
1-4600					
	Signatu	ire of a member or autho	rized representative of a men	nber	-
	JOHN AARON				

Typed or printed name of signee