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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bisignano	Holdings Umited liability Company Name of Limited Wability Company
The enclosed Articles of Amendment and for	ee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
_Sa	COH Hedger Nyme of Person
_	rano Holdings Limited liability Company
60050	Okeechobre blvd. #810
•	Palm Beach FL, 33409 City/State and Zip Code een moratin a Vanoo. Com nall address: (to be used for future annual report notification)
——————————————————————————————————————	nail address: (to be used for future annual report notification)
For further information concerning this mat	ter, please call: ن ب
Scott Hedger Name of Person	at (305) 851-6209 Area Code Daytime Telephone Number
	401 -323-9473 - POA
Enclosed is a check for the following amou	nt:
X S25.00 Filing Fee ☐ \$30.00 Filin Certificate	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bislo	nano Ho	Idinos linti	ted liabili	ty company
Tivante of the farmet	A Florida Limited Liabil	ty Company)	<u>01(3.</u>)	2 ~
The Articles of Organization for this Limited Lie		e filed on <u>12/7</u> /	/2021 an	d assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, <u>enter the new name of</u>	the limited liability	company here:		
The new name must be distinguishable and contain the we	ords "Limited Liability Co	ompany," the designation "I	LC" or the abbreyiation	on "L.L.C."
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	<u> (ADDRESS)</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E			· ·	J.
	_			
B. If amending the registered agent and/or re agent and/or the new registered office address		ess on our records, <u>en</u>	ter the name of th	e new registered
Name of New Registered Agent:	Scott	Hedger		
New Registered Office Address:	60050	OKechok	oee blvd.	#810
	West Pa	Hedger OKechok Enter Florida street add Im Beach. City	Florida 336	109
		, ni	Σ.ψ, (· · · · · ·

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.

Charging Registered Agent, Signature of New Registered Agent

POH Kylein morston

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
Mar	Kyleen Hopkins-	5 wate robin rd unit 2709	□Add
3	Moraton	5 wake robin rd unit 2709 Lincoln RI 02-865	KRemove
			□Change
			□Add
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•		·	□¢hange
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			□Remove
			□Change

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ve date, if other than the date of filing: $8/23/2022$ (op	itional)
ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aff If the date inserted in this block does not meet the applicable statutory filing requirements, the	ter filing.) Pursuant to 605.020
ent's effective date on the Department of State's records.	ms date will not be fisted a.
I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ed.	(b) The 90th day after the
1/10	
1/12 2023	
Signature of a member or authorized representative of a member	
// (, U) FH U V (/	