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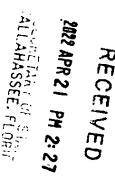
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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

ONE BRIC	KHOUSE ENTERPRISES, LI	.C	
Sobile 1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lawrence Jones		
		Name of Person	
		Firm/Company	
	1818 Fannin speedway ap		
		Address	
	Houston, TX 77045		
	info@onebrickhousesolutio	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	ali:	
Lawrence Jones		800 410-2073	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		Street Address: Registration Sec	ction
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

FILED

ONE BRICKHOUSE ENTERPRISES, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

SECOTION The Articles of Organization for this Limited Liability Company were filed on 4/4/2022 Florida document number 1.18000155992 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: True Victory Solutions, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2200 NW Corporate Blvd Enter new principal offices address, if applicable: Ste 407 #345 (Principal office address MUST BE A STREET ADDRESS) Boca Raton, FL 33431 2200 NW Corporate Blvd Enter new mailing address, if applicable: Ste 407 #345 (Mailing address MAY BE A POST OFFICE BOX) Boca Raton, FL 33431 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 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 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 Changing Registered Agent, Signature of New Registered Agent

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
			□Remove
			Change
			□Add
			□Remove
			□Add
			□ Remove
			Change
			□ Add
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			□Change
			☐Add
			□ Remove
			□Change
			□ Remove
			□Change

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- 1	am amending the address from 8350 nw 52nd Ter Suite 301 #345 Doral, FL 33166 to
2	2200 NW Corporate Blvd Ste 407 #345 Boca Raton, FL 33431
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f an effe Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated ₋	April 4 2022
	Signature of a member or authorized representative of a member