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236 East 6th Avenue. Tallahassee, Florida 32303

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	CERTIFIED COPY		
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XX	FILING	LLC AMEND	
1.	TREND AT LLC		
	(CORPORATE NAME AND I	OOCUMENT #)	
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SPECIAI	L INSTRUCTIONS:		
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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
TREND A			
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Augusto Granados		
		Name of Person	·
	Granados Davey LLP		
		Firm/Company	
	240 Crandon Blvd, Ste 26.	3	
		Address	
	Key Biscayne, FL 33149		
		City/State and Zip Code	
	agranados@granadosdavey		
	E-mail address: (to be used for future annual report noti	ification)
For further information	concerning this matter, please c	all:	
Augusto Granados		305 951-5477 at()	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
	•	□ 655 00 mm m P.	□ \$60.00 Pilion P
■ \$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 Addr		Street Address:	
Registration	Section Corporations	Registration Se Division of Cor	
P.O. Box 63	•	The Centre of T	9

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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TREND AT LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor liability Company)	(ds.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000164313</u> .	were filed on 07/06/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SAT Packaging LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		<u></u>
New Registered Office Address:		
	Enter Florida street addi	rece
·	.1	Florida
	City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agents	<u>.</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60:	and I am familiar with and 5, F.S. Or, if this document is

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
			□Add
		 	□Remove
			Change
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			☐ Change
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Effective date, if other If an effective date is listed, Note: If the date inserted document's effective date.	the date must be speci ed in this block does	fic and cannot be price not meet the anni	icable statutory fili	(option nore than 90 days after fi ng requirements, this c	ling) Pursuant to 605 0207
e record specifies a delayed is filed.	red effective date, but	ut not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
		2024			
December 18		21/27			
Dated December 18		-,	<u> </u>		
Dated December 18	f./_	-/_	· ·		
Dated December 18	Signature	-/_	horized representativ	c of a member	