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Division of Corporations

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M. SOLOWON

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Help

DocuSign Envelope ID. FE05C4FC-91B4-485E-ABF5-7C6F86B8ABF2 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

**		
METROWEST CAPITAL LLC		
(<u>Name of the Limited Liabib</u> (A Florid	ity Company as it now appears on our re a Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability (Florida document number 1.18000182516	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	<u>D</u>
		-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>er</u>	iter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	lthess
	City	, Florida <u>Zıp Code</u>
	÷	

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 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 i 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.

II Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: FE05C4FC-91B4-485E-ABF5-7C6F86B8ABF2 reamoning Authorized reason(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Acti
MGR	FRIEDMAN, PAULA K.	170 HYSLOP ROAD, BROOKLINE, MA 02445	= Add
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Effective date, if other than the date of an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	does not meet the applic	to date of filing or more than 9 able statutory filing require	(optional) 0 days after filing) Pursuant to ments, this date will not be	605 02 listed
record specifies a delayed effective d d is filed	ate, but not an effective ti	me, at 12.01 a m on the ca	rlier of: (b) The 90th day :	aîter th
DECEMBER 21	2020	<u> </u>		

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