L18000187497

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COVER LETTER

TO:		istration Sect ision of Corpo		·	·		
418 513 687		AD INFINIT	UM LLC				
SUBJE	.CT:		Name of Limi	ted Liability Company			
The end	elosed	Articles of A	mendment and fee(s) are subt	nitted for filing.			
Please r	return	all correspond	dence concerning this matter t	o the following:			
			Alexander Onaindia				
				Name of Person			
			Distinction Agency				
				Firm/Company			
			1004 High P	olat Coop Address			
				Address			
			Longwood	FL 32°75°6 City/State and Zip Code			
			alex@distinctionagency.com	•			
			E-mail address: (1	o be used for future annual report notification	n)		
For fur	ther in	nformation cor	ncerning this matter, please ca	ill:			
Alexan	nder C)naindia		407 488-2466 at ()			
		Name of I	Person		phone Number	2023 SEC:	
Enclose	ed is a	check for the	following amount:			2023 AUG 2 SECRETAR TALL ALR	
= \$2:	5.00 1	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing. Certificate of Certified Copp (additional copy)	Péé: Suitus P	T

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{8/06/2018}{1}$ and assigned Florida document number L18000187497 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Alexander Onaindia Name of New Registered Agent: New Registered Office Address:

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>	Name	Address	Type of Action
President.	Jonathan Lubic	325 S Biscayne Blvd	□Add
		Miami, Fl 33131	Remove
			□Change
		, and the same of	□Add
			□Remove
			Change
			SE Change
			PH Remove
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