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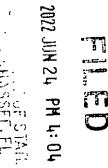
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Tallahassee, FL 32314

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enn use		A MAR	RIE MOFORIS LLC					.•	• .		
SUBJEC	.1:	Name of Limited Liability Company									
The encl	osed Artic	eles of A	Amendment and fee(s) are sul	bmitted for filing.							
Please re	turn all co	orrespon	idence concerning this matter	r to the following:							
			DIANNE S DEMOS								
				Name of Pers	on						
			JAMES P DEMOS PA								
				Firm/Compar	ıy						
			9820 SW 1ST COURT								
				Address				<u>-</u>			
			PLANTATION FL 333	324							
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			demos_j@comeast.net				**** · · · ·				
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For furth	er inform	ation co	ncerning this matter, please of	call:						, 22	
DIANNI	E S DEM	OS CPA		954 at (648	-8066			3 -	2022 JUN 24	
]	Name of	Person	Area Cod	le e	Daytir	ne Telepho	one Number	NSSK	24 PM	
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Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee								

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RENA MARIE MOFORIS LLC (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 $\frac{09/11/2018}{1}$ and assigned Florida document number L18000216353 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 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 we registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street 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

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