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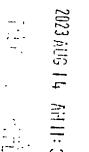
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
Certified Copies Certificates of Status
Contribution of the Carlo
Special Instructions to Filing Officer:

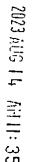
Office Use Only

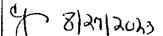


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COVER LETTER

TO:

то:	Registration Se Division of Cor		•	· .•		
CALD I		SHALOM AI	IAVA CAPITAL, LLC			
SUBJI	ECT:	Name of Lim	ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
			WINSTON B. MOXEY			
			Name of Person			
		BOWERBANK IN	COME TAX & ACCOUNTING S	ERVICES, INC		
			Firm/Company			
			1113 N. PINE HILLS ROAD			
			Address			
		Address ORLANDO, FLORIDA 32808-7125				
			City/State and Zip Code			
		bowerbank@cfl.rr.com	to be used for future annual report not	fication		
For fur	ther information c	oncerning this matter, please c		incarion,		
	WINSTON	в. мохеу	407 523-2500			
	Name of	f Person	Area Code Daytin	ne Telephone Number		
Enclos	ed is a check for th	ne following amount:				
□ \$2	5.00 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 Se	etion		
	Division of C	orporations	Division of Cor	rporations		
	P.O. Box 632 Tallahassee, I		The Centre of 7	Fallahassee be Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHALOM AHAVA CAPITAL, LLC

2023 AUG 14 AH 11: 35

(Name of the Limited Liabili (A Florida	ty Company as it now appea Limited Liability Company)	rs on our record	<u>ls.</u>)	TE
The Articles of Organization for this Limited Liability C Florida document number	ompany were filed on _	SEPTEMBER	. 13, 2018	and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company h	<u>ere</u> :		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the	designation "LLC	or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			<u> </u>	
(Principal office address MUST BE A STREET ADDR	RESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	d office address on our	records, enter	the name o	
	Emer Fibriaa sireei aaaress			
	City	, Fl	orida	Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:			
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance o gent as provided for in	f my duties, ai Chapter 605,	nd I am fan F.S. Or, if	niliar with and this document is
	If Changing Registered A	gent, Signature c	of New Regist	ered 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
MGR	BEATRICE H. MOXEY	1113 N. PINE HILLS RD; ORLANDO, FL 32808	\ Add
			□Remove
			□Change
	·		□Add
			□Remove
			Change
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(If an effe Note:	ve date, if other than the ective date is listed, the date must If the date inserted in this bloent's effective date on the De	be specific and cannock does not meet	not be prior to d the applicable		re than 90 days afte		
he record ord is fil	d specifies a delayed effective ed.	date, but not an e	ffective time,	at 12:01 a.m. o	n the earlier of: (l	b) The 90th day	after the
Dated	AUGUST 11	20	023				
	· · · · · · · · · · · · · · · · · · ·		1		۸.		
				` ` -	1 1	A	
		Signature of a memi	per or authorize	rd representative of	of a member		_

Filing Fee: \$25.00