## L19000054138

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

## EAGLE MANAGEMENT SOLUTIONS, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(7/ 1:16	ortua tamineu taminty Com	pany)		ا ا ا
The Articles of Organization for this Limited Liability Florida document number	y Company were filed o	on FEBRUARY 25	, 2019 and assigned	
Florida document number <u>L19000054138</u>	·		1	
This amendment is submitted to amend the following	j.			
A. If amending name, enter the new name of the	limited liability compa	ny here:		
The new name must be distinguishable and contain the words "	Limited Liability Company.	" the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	NO CH	ANGE		
(Principal office address MUST BE A STREET AL	ODRESS)		<u> </u>	
		<del></del>		
Enter new mailing address, if applicable:	NO CH	ANGE		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<del></del>		
		<del></del>	<u>-</u> -	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on o <u>e</u> :	our records, <u>enter the</u>	name of the new regi	stered
Name of New Registered Agent: No	O CHANGE			
New Registered Office Address:				
The Registered Office Finderess.	Ente	er Florida street address	<del></del>	
		, Florid		
N. B. C. J. A. al Ol.	City		Zip Code	
New Registered Agent's Signature, if changing Regist	cred 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>	<u>Name</u>	Address	Type of Action
<u>AMBR</u>	DENENE L. STUBBS-JAMES	182 S.W. 7TH STREET DEERFIELD BEACH, FLORIDA 33441	ØAdd
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fectiv	e date, if other than the date of filing:
n effec	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 (207 C
cumer	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the selfective date on the Department of State's records.
ecord : is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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ted_	Seftember 3 4020
	Marialla a) Maria

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Typed or printed name of signee