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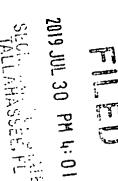
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## **COVER LETTER**

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SU	BJECT:	TE	Λ	DelfA! Name of Limit	IN Ves	ment L	Le_
The	e enclosed Article	es of Amendn	nent an	d fee(s) are subn	nitted for filing.		
Ple	ase return all cor	respondence (	concer	ning this matter to	o the following:		
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Compar	ny were filed on 7/2	Zo19 and assigned
Florida document number 11900172625.	y were med on	T Lov I and assigned
Piorida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
	∜ .	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	i.,.	2019 SEC FA
(Principal office address MUST BE A STREET ADDRESS)	<del>-</del>	
Trining and the second		ω
		SSS: PH III
Enter new mailing address, if applicable:	•	
(Mailing address MAY BE A POST OFFICE BOX)		(Time) (O
(Mining undress MAT DEAT OST OFFICE BOX)		<del></del>
	<del>711</del>	
B. If amending the registered agent and/or registered		ls, enter the name of the ne
registered agent and/or the new registered office address he	ere:	
	•	
Name of New Registered Agent:		<del> </del>
New Registered Office Address:	<u> </u>	
	Enter Florida street addre	55
		lorida Zip Code
	City	721 23 1

If Changing Registered Agent, Signature of New Registered Agent

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 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
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Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docur	nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
IΠ€	e 90th day after the record is filed.
	7/23/19
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Datec	Signature of a member of authorized representative of a member

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