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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		•
On the Lea	n LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Antonio Sullo		
	-	Name of Person	
	On the Lean LLC		
		Firm/Company	
	3047 SW 38th Ct		
		Address	
	Miami, Fl 33146		
		City/State and Zip Code	
	studio@otl-design.com	to be used for future annual report noti	Carrier III
For further information c	oncerning this matter, please c	•	reation)
Antonio Sullo		786 473-7767	
Name o	l'Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
☐ \$25.00 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 Address Registration S		Street Address: Registration Sec	ction
Division of Corporations		Division of Cor	porations
P.O. Box 6327		The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

On the Lean LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our recordability Company)	rds.)
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L19000226289		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
OLTRELIMITI LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3047 SW 38th Ct	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33146	۲٦ ,
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	3047 SW 38th Ct	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33146	:
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
	. Florida	
 	City	Zip Code

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 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
			🗆 Add
			□Remove
			□Change
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. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
(If an ef Note:	ive date, if other than the date of filing:
he reco ord is f	rd 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 led.
Dated	January 23 2025
	Signature of a member or authorized representative of a member
	Antonio Sullo
	Typed or printed name of signee