L19000241613

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COVER LETTER

TO:

	Registration Se Division of Cor			
o	ENIGMA I	FM LLC		
SUBJEC	تا: <u></u>	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	indence concerning this matter	to the following:	
		JESSICA MOLINA		
			Name of Person	
		M360 MANAGEMENT L	LC	
			Firm/Company	
		2434 HOLLYWOOD BOU	JLEVARD, 2ND FLOOR	
			Address	
		HOLLYWOOD, FL 33020)	
			City/State and Zip Code	
		ADS@SIRULNIKLAW.CO		
For furth	ner information c	e-mail address: ()	to be used for future annual report not	incation)
		one or maner, premot ex		
1E22IC.	A MOLINA		954 744-4051 at ()	
	Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed	d is a check for t	he 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 Section		Street Address: Registration Se	ection	
Division of Corporations		Division of Co	Division of Corporations	
	P.O. Box 633 Tallahassee,		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ENIGMA FM 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 10/07/2019 Florida document number _____L19000241613 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ONEWAY CENTER INVESTMENTS LLC 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: (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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___

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.

City

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			
Title	<u>Name</u>	Address 2021 MAR 18 AM 11: 12	Type of Action
			□Add
			Remove
			□Change
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			□Add
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			Change
			DAdd
			Remove
			□Change

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Note: If the date inserted	than the date of filing:
e record specifies a delayed and is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 3 (7	2021
	Signature of a member of nationized representative of a member
	Josephenia Si Ha
	Typed or printed name of signee

Filing Fee: \$25.00