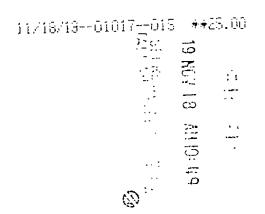
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	of AIC	·	
SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filling. Please return all correspondence concerning this matter to the following: This is a concerning this matter to the following: Name of Person			
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	F Marker	Kilango	
		Name of Person	
	- Alleviel	Gindle :	
		, ,	
	18 BN 45	2791	
	Minta (JA 30311	
		City/State and Zip Code	
	E-mail address: (1	Of Letter Color Color (Color Color to be used for future annual report i	notification)
For further information co	oncerning this matter, please ca		
Francisco	lii)	at (1/6 ()	-9452
Name of	Person	Area Code Day	time Telephone Number
Enclosed is a check for th	e 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears o	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on <u>/C</u> Florida document number <u>L/90CO34G48</u> .9	0/01/2019 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	: :
he new name must be distinguishable and contain the words "Limited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	75. 10
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	cirri vo
	Ø
B. If amending the registered agent and/or registered office address on o registered agent and/or the new registered office address here: Name of New Registered Agent:	our records, <u>enter the name of th</u>
Name of New Registered Agent.	
New Registered Office Address: Enter Florida	a street address
	a street address , Florida

New Registered Agent's Signature, if changing Registered Agent:

1

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>	<u>Address</u>	Type of Action
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		2431 Gubstream Dr. Miramar Al 33W23	Remove
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Filing Fee: \$25.00