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Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: *COV*  
Account Name : TRIPP SCOTT, P.A.  
Account Number : 075350000065  
Phone : (954)525-7500  
Fax Number : (954)761-8475

*100492.0002*  
*ME II*

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MATHAIKA ENTERPRISES II, LLC

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MAY 22 2020

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ARTICLES OF AMENDMENT  
to  
ARTICLES OF ORGANIZATION  
of  
**MATHAIKA ENTERPRISES II, LLC**  
(a Florida limited liability company)

The Articles of Organization for this Limited Liability Company were filed on November 22, 2019 and assigned Florida document number L19000290445.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NA

Enter new principal office address, if applicable: 2392 North Federal Hwy  
Fort Lauderdale, FL 33305

Enter new mailing address, if applicable: 11555 Heron Bay Blvd, Suite 200  
Coral Springs, FL 33076

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: NA

New Registered Office Address: 11555 Heron Bay Blvd, Suite 200  
Coral Springs, FL 33076

**New Registered Agent's Signature**

*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.*

NA  
Signature of New Registered Agent

C. If amending the Managers or Authorized Member on our records, enter the title, name and address of each Manager or Authorized Member being added or removed from our records.

MGR = Manager  
MBR = Member  
AMBR = Authorized Member

<u>Title:</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dennis J. Wellert	11555 Heron Bay Blvd., Suite 200 Coral Springs, FL 33076	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Dennis J. Wellert	1949 North University Drive Coral Springs, FL 33071	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here:

NA

E. Effective date, if other than the date of filing: NA (optional)

Dated: May 21, 2020

Marianna R. Seiler

Marianna R. Seiler, Esq. authorized representative of a member

Typed or printed name of signee

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