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SECRETARY OF STATE TALLAHASSEE, FIRETE

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

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Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

( <u>Name of the Limited Li</u> (A F)	ability Compar orida Limited L	ny as it now appears on our records iability Company)	<u>s.</u> )	
The Articles of Organization for this Limited Liabili Florida document number	ity Company	were filed on	and assigned	
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liabi	lity company here:		
i/A			1A S	
he new name must be distinguishable and contain the words."	"Limited Liabili	ty Company," the designation "LLC"	or the abbreviation	
Inter new principal offices address, if applicable:	:	121 Crandon Blvd Apt 257	HAY I	
Principal office address MUST BE A STREET AL		Key Biscayne FL 33149-1644	SSEE S	
			- E	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		121 Crandon Blvd Apt 257	nadba Orabba	
		Key Biscayne FL 33149-1644		
. If amending the registered agent and/or registered and/or the new registered office address her	<u>re</u> :	ddress on our records, <u>enter t</u>	the name of the new regist	
Name of New Registered Agent:	A			
New Registered Office Address: 12	121 Crandon Blvd Apt 257			
		Enter Florida street address		
Ke	ey Biscayne	, Flo	33149-1644 rida	
<del></del>	<del></del>	City	Zip Code	

US MUROTECH, LLC

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>	<u>Name</u>	<u>Address</u>	Type of Action
	N/A		□Add
			□Remove
			□Change
	N/A		□ Add
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Effective date, if other th	an the date of filing:	(optional)
If an effective date is listed, the	an the date of filing:  date must be specific and cannot be prior to date of filing or more than 90 day this block does not meet the applicable statutory filing requirement	es after filing.) Pursuant to 605.0207 (
document's effective date of	this block does not freet the applicable statutory fring requirement of State's records.	is. this date will not be fisted as t
e record specifies a delayed or rd is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
	2023	
May H		
May 11 Dated	··	
	··	
	Signature of a member or authorized representative of a member	