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COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

ILM Holdi	ngs LLC		
SUBJECT:	Name of Lin	ited 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:	
	Sean Auerbach		
	<u> </u>	Name of Person	· · · · · · · · · · · · · · · · · · ·
	ILM Holdings LLC		
		Firm/Company	
	1210 Stirling Rd - 10B		
		Address	 -
	Dania Beach, FL 33004		
		City/State and Zip Code	
	sean@satorilinens.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Sean Auerbach		954 914-2823	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ S25.00 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 Addres Registration 5		<u>Street Address:</u> Registration Sec	ction
Division of Corporations		Division of Cor	

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

TLT 40	UDINGS LLC List. 27 A113:32
(Name of the Limited Li (A F	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabili Florida document number 1200 5552765	ty Company were filed on $\frac{1}{21}/2020$ and assigned
This amendment is submitted to amend the followin	
A. If amending name, enter the new name of the	limited liability company here:
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 A)	ODRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	2
B. If amending the registered agent and/or regist agent and/or the new registered office address he	ered office address on our records, <u>enter the name of the new registered</u> re:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida strect address
_	, Florida
New Registered Agent's Signature, if changing Regis	2, 2

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

Title	<u>Name</u>	<u>Address</u> = 2.22 27 7.110:	े दे <u>ype of Action</u>
AMBR	Lena Rossello	1210 Stirling Rd #10B	
		Dania Beach, FL 33004	□Remove
			©Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
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			□Remove
			□Change

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Effective date, if other than the first of the date is listed, the date in <u>Note:</u> If the date inserted in this document's effective date on the	e date of filing:
e record specifies a delayed effect rd is filed.	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
	2020
Dated	2020
Dated Aug 26th	

Filing Fee: \$25.00