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JUN 20 2020

COVER LETTER

TO: Registration Section Division of Corporation				
SUBJECT:	Ledges LLC	ed Lizhility Company		
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter to	the following:		
	Chané Roa	Name of Person		
	LuxiLedger	Firm Company		
	PO Gox 2/2	748/ ₀ Address		
-	Chane randal	332/a City State and Zip Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office Code Day Office	1 notification)	
For further information conc	erning this matter, please cal	l:		
Chane Rando Name of Pe	n //	at (18/2) Area Code D	93. 0456 aytime Telephone Number	-
Enclosed is a check for the f	following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is exclosed	Sectificate of St Certificate Copy (additional copy is a	anes &

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Luxilaber I.C.						
(Name of the Limited Liability Comp. (A Floreda Limited)	any as it now appears Liability Company)	on our records.)				
The Articles of Organization for this Limited Liability Compan	y were filed on F	hrvary 10 2	220	and 255	ismed	
Florida document number <u>L2000047355</u> .		7-7			-	
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the fimited fix	bility company be	<u>re</u> :				
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the de	signation "LLC" or the	abbrevi	ation "L	.L.C."	-
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)			¥€ 33	<u> </u>		_; ::
				<u>~</u>	T	-:
			XX	+	7	
Enter new mailing address, if applicable:			SS	-=-	-FÀ	_
(Mailing address MAY BE A POST OFFICE BOX)			m _c ,	· 	0	_
		. <u></u> 1	<u>₽</u>	<u>~</u>		_
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our re	cords, <u>exter</u> the na	ime of	the ner	n regist	<u>ered</u>
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·				_
New Registered Office Address:	······································					_
	Exter Flori	on February 10, 1010 and assigned The designation "LLC" or the abbreviation "LLC." The designation "LLC" or the abbreviation "LLC." The designation "LLC" or the abbreviation "LLC."				
	 	, Florida				_
	City		Z	p Code	_	
New Registered Agent's Signature, if changing Registered Agent	<u>t</u>					

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> **Type of Action** _ [] Add _ Ranne □ Change □Add _____ Change _ □Remove _ □ Add _ 🗆 Remove

_____ □Change

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Tective date, if other than the date of filing: un effective date is listed, the date must be specific and cannot be prior to date of filing or more to	(optional) than 90 days after filing.) Pu	rsuant to 60:	5.0201
ote: If the date inserted in this block does not meet the applicable statutory filing re- cument's effective date on the Department of State's records.	quirements, this date wil	l not be list	ted as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the is filed.	he earlier of: (b) The 9	Oth day afte	er the
and May 28 / ADXD			
ned May 28 / Jane Kantall			
Signature of a member of authorized representative of a	ı member		
Chané Kandall			

Filing Fee: \$25.00