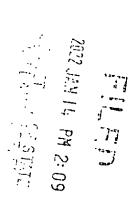
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(Adda	ress)	· <u> </u>
(Addn	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

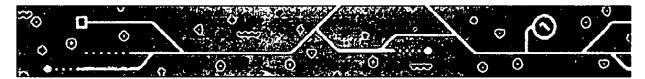
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Y. SCOTT JAN 2 3 2022



zenbusiness

Jan 11, 2022

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Namary Holdings LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you,

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Namary Holdings LLC		
(<u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Conforda document number 1.20000047859	npany were filed on 02/11/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
		cū2
he 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:		
	ee)	
Principal office address MUST BE A STREET ADDRES	2.37	70
		25
		- Paris
Inter new mailing address, if applicable:		1.1
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered o	ffice address on our records, <u>enter the</u>	name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:	***	
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a
	Cuy	Zip Code

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

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>	Name	Address	Type of Action
AMBR	Marcus Johnson	1255 Sharif Drive	□Add
		Fort Walton Beach, FL 32547	≣Remove
			□Change
AMBR Keenan Card	Keenan Card	9181 Venezia Plantation Drive	□Add
		Orlando, Fl. 32829	■Remove
			Schange
		·	©€hange
			Remove
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fective date, if other than the uneffective date is listed, the date muote: If the date inserted in this b	st be specific and canno lock does not meet the	ie applicable si			ng.) Pursu	
cument's effective date on the D	epartment of State's	records.				
ecord specifies a delayed effectivis filed.	ze date, but not an ef	fective time, at	12:01 a.m. on the	ne earlier of: (b)	The 90th	day after the
January 11	. 20.	22				

Filing Fee: \$25.00