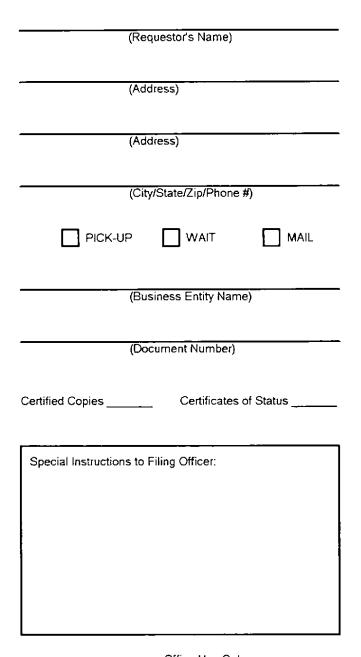
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R. HUNT

COVER LETTER

Div	ision of Corp	oorations		
odla mere.	TRONIX H	OLDINGS, LLC		
SUBJECT:		Name of Limit	ed I iability Company	
The enclosed	d Articles of z	Amendment and fee(s) are subr	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	o the following:	
		Ryan Williams, Esq.		
			Name of Person	
		Coastal Law Group, PLLC		
			Firm/Company	
		105 Solana Road, Suite C		
			Address	
		Ponte Vedra Beach, FL 32	082	
			City/State and Zip Code	
		contact@coastal.law		
		F mail address; (to be used for future annual report in	mffcation)
For further	information c	oncerning this matter, please ea	ill;	
Ryan Willi	ams, Esq.		904,930,4	
	Name o	f Person	Area Code Days	nne Telephone Number
Enclosed is	a check for t	he following amount:		
₩ \$25,00	Filing Fee	[] \$30,00 Filing Fee & Certificate of Status	LI \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	[7] \$60,00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed:
	uitiaa kalalaa		Stroot Address:	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Registration Section

TO:

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 TO ARTICLES OF ORGANIZATION OF

TRONIX HOLDINGS, LLC (Name of the Limited List (A Flor	nility Compan	ny as it now appears on o	ur records.)	
(A Flor	ida Eimited L	aability Companyl		
The Articles of Organization for this Limited Liability	Company	were filed on $\frac{02/24/20}{}$	20	and assigned
lorida document number 1.20000061459				
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited l <u>jab</u> i	ility company here:		
he new name must be distinguishable and contain the words "I	imited Labil	ny Company, the designa	tion "LLC" or the abb	reviation "L.I.C."
Enter new principal offices address, if applicable:		733 North Drive Suite	e F	<u> </u>
Principal office address MUST BE A STREET AD	DRESS)	Melbourne, FL 3293	ia	22
Traction office diameter in constraints				83.
				EB 22 F
Enter new mailing address, if applicable:		733 North Drive Suit	e F	32 88
Mailing address MAY BE A POST OFFICE BOX)		Melbourne, Fl. 3292	3-4	? £
Maning address MAT BL AT OUT OF THE BOXY				07
B. If amending the registered agent and/or registered agent and/or the new registered office address her Name of New Registered Agent:		address on our record	ls, <u>enter the name</u>	of the new regist
73	733 North Drive Suite F			
New Registered Office Address: 73.	-	Enter Florida st	reet address	
Mo	elbourne		, Florida _329)34
		Cire	,, , ,	Zın 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.

Iſ	Changing Registe	red Age	ent. <u>Signatur</u>	re of New	Registered Agent

If an ending 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	Name	Address	Type of Action
			[]Remove
		,	[]Change
			[] Add
			□Remove
			[]Change
			LIAdd
			TIRemove
			ClAdd
			□Remove
			[]]Change
			□Remove
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□.Add
		<u></u>	[]Remove
			DChange

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an effective date is listed fote: If the date insert	er than the date of filir, the date must be specific at ed in this block does not ate on the Department of	nd cannot be prior to d meet the applicable	ate of filing or more than	(optional) 90 days after filing.) Pursua rements, this date will no	nt to 605 0207 t be fisted as
record specifies a deli I is filed.	yed effective date, but no	ot an effective time.	at 12:01 a.m. on the o	earlier of: (b) The 90th c	day after the
Dated February	18	2021			
M	M/ Crayles	<u>/</u>			
/	/ Signature of a	a member or authoriz	ed representative of a mo	emper	

Filing Fee: \$25.00