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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : H & CO, LLP Account Number : I20150000089 : (305)444-8800 Phone : (305)444-4010 Fax Number

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Email Address: cayon@hcoadvisors.com

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K. Brumbley

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VITA ADVISORS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{03/11/2020}{}$ and assigned Florida document number L20000079799 This amendment is submitted to amend the following: 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Fax: (850) 617-6383

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>	Address	Type of Action
AMBR	TSCS HOLDINGS LLC	1071 NASH DRIVE	□Add
		CELEBRATION, FL 34747	Remove
			Change
			🗆 🖂 Add
			Remove
			☐ Change
			□Add
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Effective date, if other than the first an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	he date of filing:  must be specific and cannot be prior to block does not meet the applicab  Department of State's records.	date of filing or more than 90 ele statutory filing requirem	(optional) days after filing.) Pursuant to 605.07 ents, this date will not be listed	207 as
e record specifies a delayed effect rd is filed.	tive date, but not an effective time	e, at 12:01 a.m. on the earli	ier of: (b) The 90th day after th	he
Dated May 12	m Salles Signature of a member or authori	. •		
12 1	Sillin			
<u> camana 47</u>	Signature of a member or authori	zed representative of a member	er	
CLAUDIA N SALLI	Typed or printed	name of signee		