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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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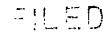


COVER LETTER

| TO: Registration Secti Division of Corpo | | | |
|---|--|--|---|
| SUBJECT:TWO | HEARTS Name of Lim | ACCESSOBI ited Liability Company | ES LLC |
| The enclosed Articles of An | nendment and fee(s) are sub | mitted for filing. | |
| Please return all correspond | ence concerning this matter | to the following: | |
| | | Laura / Miyar | 05 |
| | | Two Hearts Access | sories ILC |
| | 46 | 21 SW. 12-th Str | eet tuam, FL 33134 |
| | E-mail address: (| City/State and Zip Code 1 Y A R ES O GM Code to be used for future annual report notific | 34 0 / CM . |
| For further information cond | cerning this matter, please co | all: | |
| Laura Name of Po | Mi Yares | $\frac{\text{at } (305)}{\text{Area Code}} = \frac{600}{\text{Daytime}}$ | 7 -323/ Telephone Number |
| Enclosed is a check for the f | ollowing amount: | | |
| □ \$25.00 Filing Fee | S30.00 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 Address: | | Street Address: | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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**



2822 AUG 11 AM 9: 4

| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appears on our records.) Jability Company) | 1.75 EXESTE () |
|--|---|-----------------------|
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 2 000083092</u> | were filed on March 16,300 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| TWO HEARTS AND A | DOVE LLC | |
| The new name must be distinguishable and contain the words "Limited Liabil | | |
| Enter new principal offices address, if applicable: | 4621 S.W. 1 | 2th Street |
| (Principal office address MUST BE A STREET ADDRESS) | Miani, Fl 331 | 34 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 4621 5.41 12 Mian, Fl 33134 |) th Street |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: $\mathbb{N} \mathcal{H}$ | ddress on our records, enter the name | of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | | |
| | , Florida | 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 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 | |
|--------|------------|----|
| AMRD - | Authorized | A. |

| AMBR = | Authorized Member | | |
|--------------|-------------------|--------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | | | |
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Page 2 of 3

| Effective date, if other than the date of filing: | | |
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| Effective date, if other than the date of filing: [Optional] If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed. Dated Dated Dated August 1. | | |
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| Dated <u>Queyert 8</u> . 2022 . | | |
| Panali M | | |
| Pauch M | Dated | <u>Jugust 8</u> . 2022. |
| Signature of a member or authorized representative of a member | | Parala Ma |
| | | Signature of a member or authorized representative of a member |
| | | |

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