Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000150153 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN XI THREE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

MAY 2 1 2020

Articles of Amendment to LLC Articles of Organ	ization of
The Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for this Limited Liability Company were and assigned Florida document number of the Articles of Organization for the Organization	re filed on
This amendment is submitted to amend the following:	
THE NEW NAME SHALL E	3 <u>E</u>
Elevation Spectrum L.L.	<u>C</u> .
	2021
	HAY 20
These articles of amendment were adopted on	
Dated $\frac{5/20/20}{}$: 37
Structure of a member or authorized representative of a member	····
Typed or printed name of signee	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the position.	onligations of the
Signature of New Registered Agent, if changing	