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COVER LETTER

TO:

Registration Section Division of Corporations

IDTAFH I	LLC						
Name of Limited Liability Company							
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.					
Please return all corresp	ondence concerning this matter	to the following:					
	Justin Cunningham						
		Name of Person	212 1. 212 1				
	IDTAFH LLC						
		Firm/Company					
	418 mallard lane						
	·	Address					
	Weston FL, 33327						
		City/State and Zip Code					
	justin.cunningham@live.co						
	E-mail address: (to be used for future annual report noti	fication)				
For further information	concerning this matter, please c	all:					
Justin Cunningham		954 629-2170 at ()					
Name	of Person	Area Code Daytim	e Telephone Number				
Enclosed is a check for	the following amount:						
■ \$25.00 Filing Fee	□ \$30.00 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 Addro Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address; Registration Sec Division of Cor The Centre of T	porations				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IDTAFH 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 $\frac{5/15/2020}{1}$ Florida document number L20000131993 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." 418 mallard lane Enter new principal offices address, if applicable: weston FL, 33327 (Principal office address MUST BE A STREET ADDRESS) 418 mallard lane Enter new mailing address, if applicable: weston FL, 33327 (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.

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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Justin Cunningham	418 mallard lane	■Add
		weston FL, 33327	□Remove
			Change
MGR Susan Derkach	Susan Derkach	6110 Wiles Road	
		Apartment 306	■Remove
		Coral Springs FL, 33067	□Change
			□Add
			□Remove
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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			□Remove
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ffect	ive date, if other than the date of filing: $\frac{6/4/2020}{2}$ (optional)
	fective 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
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	the color of the c
recor I is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the iled.
	June 4th 2020
ated	
	China Harris
	Signature of a member or authorized representative of a member
	. Signature of a memory of a memory of a memory
	Susan Derkach