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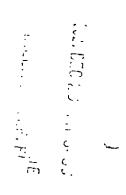
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A. **BUTLER**JAN 13 2022

COVER LETTER

TO: Registration Sect Division of Corpo	prations	
SUBJECT:	ED & RUTH Investments LLC	
	Name of Limited Liability Company	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspond	dence concerning this matter to the following:	
	WINSICI GenestAN Name of Person	
	ED & Ruth Intestments LLC Firm/Company	
	4012 Heath Circle South	
	West Pulm Beach, FL 33407	
	West Pulm Beach, FL 33407 City/State and Zip Code edgen 238 6 9 Mail. Com E-mail address: (to be used for future annual report notification)	
For further information con	ncerning this matter, please call:	
Winsic	Person at (321) 236 – 1970 Person Daytime Telephone Number	
Name of F	Person Area Code Daytime Telephone Number	
Enclosed is a check for the	following amount:	
≤ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$555.00 Filing Fee & ☐ \$60.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Status & y

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

ED & RU	th Investments (46.5-
(<u>Name of the Limited Liability</u> (A Florida	Company as it now appears on or Limited Liability Company)	ir records.
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>6/3</u> 3 01	O/ZOZO and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new page must be distinguishable and contain the words "Linu	onsulting 214	ton "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited liability company here: ED AND ROTH CONSULTING LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	eet address
		. Florida
	Ciţy	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 AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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		□Remove	
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The 90th day after the record is filed.	605,020 listed a
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Signature of a member or authorized representative of a member	
WINSICI GeneStAN Typed or printed name of signee	