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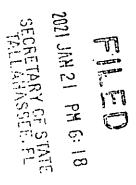
| (Re | equestor's Name) | <u> </u> |
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| Special Instructions to | Filing Officer: | |
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TO:

Registration Section

| Division of Cor | porations | | | | | |
|---|---|---|---|--|--|--|
| Self Develo | opment Group LLC | | | | | |
| Name of Limited Liability Company | | | | | | |
| | | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | | |
| | Nick Cardona | | | | | |
| | | Name of Person | | | | |
| | Self Development Group I | LI.C | | | | |
| | | Firm/Company | | | | |
| | 1291 Marsh Creek LN | | | | | |
| | | Address | | | | |
| | orlando fl 32828 | | | | | |
| | | City/State and Zip Code | · - · · · | | | |
| | nickcardona3@yahoo.com | to be used for future annual report no | nification) | | | |
| For further information e | oncerning this matter, please c | · | | | | |
| Nick Cardona | | 386 237-2788 | | | | |
| Name o | f Person | at () Area Code Dayti | ine Telephone Number | | | |
| Enclosed is a check for the | ne 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 Address | | Street Address: | | | | |
| Registration Section Division of Corporations | | - | Registration Section Division of Corporations | | | |
| P.O. Box 6327 | | | The Centre of Tallahassee | | | |
| Tallahassee. I | | | oe Street, Suite 810 | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 JAN 21 PM 6: 18

Self Development Group LLC SECRETARY OF STATE (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TALLAHASSEF, FI The Articles of Organization for this Limited Liability Company were filed on 07/08/2020 and assigned Florida document number <u>L20000194643</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Stay-k LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 20 W Lucerne circle Enter new principal offices address, if applicable: apt 602 (Principal office address MUST BE A STREET ADDRESS) orlando fl 32801 20 W Lucerne circle Enter new mailing address, if applicable: apt 602 (Mailing address MAY BE A POST OFFICE BOX) Orlando, Fl 32801 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: 20 W Lucerne circle apt 602 New Registered Office Address: Enter Florida street address _. Florida 32801 Zip Code orlando City 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> | Address | Type of Action |
|------------------------|-------------------|---------------------------------------|----------------|
| AMBR Marsel Gilmanshin | Marsel Gilmanshin | 51 pine circle dr palm coast (1 32164 | 🖺 Add |
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| F (faati | so data if other than the date of filing: (ontional) |
| Note: | to the date, if other than the date of filing: ctive 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 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records. |
| record d is file | 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 d. |
| Dated _ | 01/16/2020 |
| | Signature of a member or authorized representative of a member |
| | |
| | Nick Cardona Typed or printed name of signee |

Filing Fee: \$25.00