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Division of Corporations

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COVER LETTER

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3013201.	Name of Limited Liability Company		
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.		
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Enclosed is a check	Name of Limited Liability Company ces of Amendment and fee(s) are submitted for filing. Trespondence concerning this matter to the following: Cheyenne Moseley Name of Person Legalzoom.com, Inc. Firm/Company 101 N Brand Blvd 11th FI Address Glendate, CA 91203 City/State and Zip Code jaynice1@gmail.com 1:-mail address: (to be used for future annual report notification) tion concerning this matter, please call: Area Code Tayline Telephone Number for the following amount: for the following amount:		
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	nny ne it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000208385</u>	were filed on <u>07/17/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited ligh	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	515 E Las Olas Blvd., Ste 120	
Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, Florida 33301	
Tatan and marking address if another block	515 E Las Olas Blvd., Ste 120	2020 AU
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, Florida 33301	1
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		er the name of the ne
New Registered Office Address:	Enter Florida street address	
·	, Florida	
New Registered Agent's Signature, if changing Registered Agent	City .	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I further performance of my duties, and I a. provided for in Chapter 605, F.S. (m familiar with and Or, if this document is
If Cha	anging Registered Agent, Signature of New	Registered Agent
Page	1 of 3	

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>Address</u> Type of Action <u>Title</u> Name **AMBR** Julian Thompson _□ Remove 515 E Las Olas Blvd., Sie 120 Fort Lauderdale, Florida 33301 ■ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change D Add ☐ Remove ☐ Change _□ Add □ Remove □ Change Page 2 of 3

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rective in effect	ive date is listed, the date mu	ist be specific and cannot be p	rior to date of filing or more	(optional) than 90 days after filing.) Purp	suant to 605.0
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	Oth day after the rec	cord is filed.			
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	Angust 3	7			
	Angust 3	Anth			
	Angust 3	Anth	uthorized representative of	a member	
	Julian Thompson	Antha	uthorized representative of	a member	
		Signature of a member or a	rinted name of signee	a member	
		Signature of a member or a		a member	