10000) 3367778

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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration S Division of Co			
	RAHOLDINGS		
SUBJECT:	Name of Lin	nited Liability Company	
43			
	f Amendment and fee(s) are sub	-	
Please return all corresp	ondence concerning this matter	to the following:	
	Ketly Cleophas		
		Name of Person	
	Anew Era Solutions LLC		
		Firm/Company	Iling. ving: Of Person Company Idress Indure annual report notification) OF Iling Fee & Section Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	1300 NW 17TH AVE STE	E 180	
		Address	
	DELRAY BEACH, FL 33	445	
	ANIEWIED FOLOGOVANI (City/State and Zip Code	
	ANEWERA01@GMAIL.C E-mail address: ((to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	all:	
Ketly Cleophas		954 699-0954	
Name	of Person		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)	Certificate of Status & Certified Copy
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Registration Sec Division of Corp The Centre of Ta	oorations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANEW ERA HOLDINGS LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>08/05/2020</u>	and assigned
Florida document number L20000236778		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
ANEW ERA SOLUTIONS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1300 NW 17TH AVE STE 180	20
Principal office address MUST BE A STREET ADDRESS)	DELRAY BEACH FL 33445	72 N
		V T
Enter new mailing address, if applicable:	1300 NW 17TH AVE STE 180	AASSER
Mailing address MAY BE A POST OFFICE BOX)	DELRAY BEACH FL 33445	F 2
		G G
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new register
Name of New Registered Agent:	NA	
New Registered Office Address:	Enter Florida street address	
	N/A , Florid	a N/A
	City	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.

N/A

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
CEO	Ketly Cleophas	1300 NW 17TH AVE STE 180	🗆 Add
		DELRAY BEACH FL 33445	□Remove
			□ Add
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this belocument's effective date on the E	lock does not r	meet the applica	to date of filing or able statutory fil	more than 90 days after ing requirements, this	onal) r filing.) Pursuant to 605 s date will not be listo	.0207 (3 ed as th
record specifies a delayed effecti d is filed.	ve date, but not	t an effective tii	me, at 12:01 a.n	n, on the earlier of: (b	o) The 90th day after	r the
Dated		2022				
HALL.		,	rized representati			
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