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COVER LETTER

TO:

Registration Section

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

	Enter Flori	ida street address , Florida	
New Registered Office Address:			
Name of New Registered Agent:			
B. If amending the registered agent and/or registe agent and/or the new registered office address here		cords, <u>enter the name</u>	of the new registered
			8 4
the state of the s		_	Ö
(Mailing address MAY BE A POST OFFICE BOX)			2
Enter new mailing address, if applicable:			12
	- 		Ē.
Time par office dates s MOST BL ASTREET AD	DICESS)		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	DPFSS)		
	and the state of t	signation title of the abou	Cylanon L.L.C.
	iring 11C		eviation "L.L.C."
A. If amending name, enter the new name of the li	imited liability company he	re:	
This amendment is submitted to amend the following:	:		
Florida document number (2000) 3 41 42	2	<u> </u>	Mind assigned
The Articles of Organization for this Limited Liability	Company wars filed on A	119115 1/1 20	What regional
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	bility Company as it now appear rida Limited Liability Company)		

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 =	Мападег	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
		 	□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

Effective date, if other than the date of filing:		
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. e record 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 ord is filed.		
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Dated January 12. 2021		
	Dated	January 12 . 2021
Signature of a member of authorized representative of a member		Signature of a member of authorized representative of a member

Filing Fee: \$25.00