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Division of Corporations Division of Corporations

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September 24, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

RYLU, LLC 12396 CASCADES POINTE DR. BOCA RATON, FL 33428US

SUBJECT: RYLU, LLC REF: L20000334154

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Mel Solomon FAX Aud. #: H24000323133 Operations Manager A Letter Number: 724A00021423

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RYLU, LLC			
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on ou- nited Liability Company)	r reco <u>rds.</u>)	
The Articles of Organization for this Limited Liability Com Florida document number L20000334154	pany were filed on 10/21/202	C	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
OWENS PARTNERS, LLC			
The new name must be distinguishable and contain the words "Lumited	Liability Company," the designation	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			r 😋
Principal office address MUST BE A STREET ADDRES	<u></u>	· · · · · · · · · · · · · · · · · · ·	
		. • .	
			<u></u>
Enter new mailing address, if applicable:		(37.4)	
Mailing address MAY BE A POST OFFICE BOX)			دري سيد
		ां न	<u> </u>
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records	, <u>enter the name o</u>	f the new registe
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida strei	et address	
	 .		
	Cin	, Florida	Zip Code
	c.i.,		•

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 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
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			□Change
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