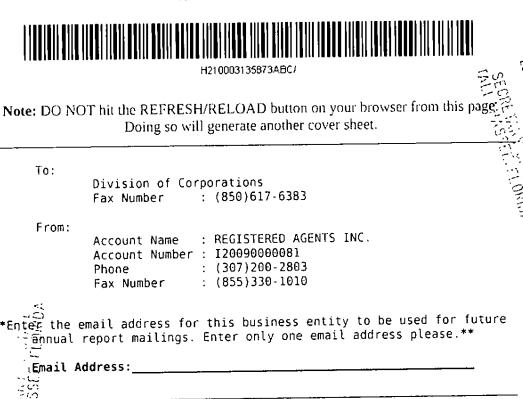
Florida Department of State Division of Corporations Plectropic Filing Coxer Sheet

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	A Sec. Sec.

LEMERE ENTERPRISES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited)	<u> Давину Сонфану)</u>	
The Articles of Organization for this Limited Liability Company Florida document number L20000368387	were filed on 11/20/20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		16 20 L
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		35
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 na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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
AR	Registered Agents Inc.	7901 4th St N STE 300	
		St. Petersburg, FL 33702	XIRemove
			□Change
AMBR	THOMAS LEMERE	7901 4TH ST NSTE 300	O &
		St. Petersburg, FL 33702	□ Remove
			□Change
			□Add
			□Remove
			①Change
****			□ Add
			□Remove
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			□Change
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			□Remove
			□Change

. If amending any other information, enter change(s	
	70.5
	Aus 20
	AM 9: 35
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot a Note: If the date inserted in this block does not meet the document's effective date on the Department of State's re-	(optional) be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (applicable statutory filing requirements, this date will not be listed as tecords.
the record specifies a delayed effective date, but not an effectord is filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated August 20 20	021
Riluy Ta	
	or authorized representative of a member
Riley Park	or printed name of signee

Filing Fee: \$25.00