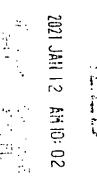
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(Requestor's Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

THORE. 050	-338-1300			
	ACCOUNT NO.	:	1200000001	95
	REFERENCE	:	599187	8255123
	AUTHORIZATION	:	Smell &	Cena 1
	COST LIMIT	:	\$ 25.00	
ORDER DATE	: January 7, 2021			
ORDER TIME	: 10:09 AM			
ORDER NO.	: 599187-001			
CUSTOMER NO	D: 8255123			
	DOMESTIC AM	4END <u>i</u>	MENT FILING	
MAM	E: DIKOR, LLC			
EFFE	CTIVE DATE:			
	CLES OF AMENDMENT ATED ARTICLES OF INCO	DRPOI	RATION	
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EXAMINER'S INITIALS: \_

CONTACT PERSON: Amanda Robinson -- EXT#

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION A FEET



DIKOR, LLC

2021 JAN 12 AM 10: 02

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/15/2020 and assigned Florida document number L20000391117 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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 = M $AMBR = A$	anager uthorized Member				
Title	<u>Name</u>	Address 2021 JAN 12 A	H 10: Tope of Action		
MGR	Gabriella Kortstam	2802 SW 67th Way	T		
		Miramar, FL 33023	□Remove		
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ated		Janua	ry 11	2021			, 			
		S	ignature of a	member or author	rized repr	esentative of	member			_

Filing Fee: \$25.00