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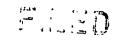
3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

06/10/2022

D	Pate: 06/10/2022
	Acc#120160000072
Name:	Archwell Operations, LLC
Document #:	
Order #:	14381802
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:	Country of Destination: Number of Certs: Certified: Plain: COGS: Country of Destination: Number of Certs:
Availability Document Examiner Updater Verifier	Amount: \$ 25.00
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Thank you!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JUN 10 AM 10: 25

Archwell Operations, LLC		SEULE STATE
Archwell Operations, LLC (Name of the Limited Liability Compan (A Florida Limited Li	y as it naw appears on our recor- ability Company)	de) (ALL. M. SOLEC, FL
The Articles of Organization for this Limited Liability Company v		
Florida document number 1.20000392263		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Moder, LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC	C" 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 adagent and/or the new registered office address here:	ldress on our records, <u>enter</u>	r the name of the new registered
agent and of the new registered office and each serve.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	ess
	r	
	City , F	loridaZip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this canacity. I fi	urther agree to comply with the
provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as p	performance of my duties, a	md I am familiar with and

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
<u>. </u>			[]Add
			□Remove
			[] Change
			🗆 🗖 Add
			□Remove
			Change
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			□Add
			□Remove
			□Change
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			□Remove
			=

). If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
<u></u>	
Note: If the date inserted in the	the date of filing: (optional) e must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) his block does not meet the applicable statutory filing requirements, this date will not be listed as the he Department of State's records.
	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated June 8	2022
/	700
	Signature of a member or authorized representative of a member
Scott Mahoney, Es	4.

Filing Fee: \$25.00