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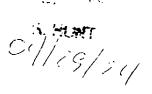
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04/29/2024

NAME: WAGPRIDE LLC

TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WAGPRIDE LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited)	ny as it now appears on our reco Liability Company)	ord <u>s.</u>)	
The Articles of Organization for this Limited L	iability Company.	were filed on 12/30/2020		and assigned
Torida document number L21000003141	·			
his amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	LC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		2031A Wilton Drive		
Principal office address MUST BE A STREET ADDRESS)		Wilton Manors, FL 33305		
				15 mg 7
Inter new mailing address, if applicable:		1401 NE, 9th Street, Unit 29		2 -
Mailing address MAY BE A POST OFFICE BOX)		Fort Lauderdale, FL 33304	<u> </u>	- 53
			in o	
3. If amending the registered agent and/or	registered office :	address on our records, ent	고 er the nan	 O
gent and/or the new registered office addre	ess here:			
Name of New Registered Agent:	Luara Codognotto			
New Registered Office Address:	1401 NF., 9th Street, Unit 29			
	Enter Florida street address			
Fort Laudere		<u>e</u> , j	Florida <u>33</u>	304
		City		Zip Code

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.

Luara Rodrigus Codognotto

GO750-0750024E0...

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 3A84F7D6-176D-4052-BED3-AFEB855FA884 It amending Authorized rerson(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
AMBR	TierPM LLC	305 NE 25th Street	
		Wilton Manors, FL 33305	■Remove
			□Change
AMBR	WagPrideLRC LLC	2031A Wilton Drive	≣Add
		Wilton Manors, FL 33305	Remove
			□Change
			□Add
			Remove
			SEE SHALL DRemove
			☐Change
			□Add
			□Remove
			□Change
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			□Change

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