2/16/2021



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future

En	ail	Addres	s:								_
an	nual	report	t mailin	gs.	Enter	only	one	email	address	please.**	,
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Liability (A Florida Li	Company as it now appears on our records, imited Liability Company)	₅)
ne Articles of Organization for this Limited Liability Conorida document number 1.21000016295	npany were filed on 01/05/2021	and assigned
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the limite	d liability company here:	
e new name must be distinguishable and contain the words "Limite	ad Liability Company," the designation "LLC"	or the abbreviation "BL.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u> </u>	
nter new mailing address, if applicable:		11 to = 1
Mailing address MAY BE A POST OFFICE BOX)		
Author Bass Co. Mar.		
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres.	5
New Registered Office Address.		
New Registered Office Address.	, Fle	orida

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 = Manager AMBR = Authorized Member

15612148442

<u>Title</u>	Name	Address	Type of Action
AMBR	Jacobson, Sydney	105 Center Street	
		Jupiter, FL 33458	■Remove
			□ Change
AMBR	Pezzino, Johnathon	105 Center Street	
		Jupiter, FL	₩Remove
			OGhunge T
			Add Remove Charles
			□Add
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f amending any other information, enter change(s)) Here. (Anac.	man since	, y 1.c.c.ssur.)· <i>)</i>	
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot lead to the date inserted in this block does not meet the document's effective date on the Department of State's respective.	applicable state	filing or more than 90 nutory filing requirer	(optional days after filin nents, this dat	l) g.) Pursuar te will not	nt to 605.020 t be listed as
ne record specifies a delayed effective date, but not an effe ord is filed.	ective time, at 1	2:01 a.m. on the car	tier of: (b)	The 90th d	lay after the
Dated February 12 September of a member	·	poresentative of a mem	ber		
Signature of a member	or antionized ich	freezonimis to or a more			
Stephen Carmel					