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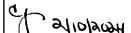
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TO:

Registration Section

| Division of Cor | porations | | • |
|---|---|---|--|
| MR CARL | , LLC | | |
| SUBJECT: | Name of Lin | nited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | CARL SENATUS | | |
| | | Name of Person | |
| | MR CARL, LLC | | Daytime Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | - | FirmvCompany | |
| | 1964 ANDERSON LN | | |
| | | Address | |
| | NAPLES, FLORIDA 3411 | 20 | |
| | | City/State and Zip Code | |
| | mrcarl.llc@gmail.com | | |
| | E-mail address: (| to be used for future annual report not | tification) |
| For further information c | oncerning this matter, please c | all: | |
| CARL SENATUS | | 239 200-6176 at () | |
| Name o | f Person | Area Code Daytir | ne Telephone Number |
| Enclosed is a check for the | ne following amount: | | |
| □ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy |
| Mailing Addres | | Street Address: Registration Se | ection |
| Registration Section Division of Corporations | | - | |
| P.O. Box 632 | 7 | The Centre of | Tallahassee |
| Tallahassee, I | FL 32314 | 2415 N. Monro | oe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024. 124 1110:28 MR CARL, LLC (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 $\frac{01/19/2021}{1}$ and assigned Florida document number L21000035608 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MR. CARLHENZO, LLC 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 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 |
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| Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the | s block does not meet the appli- | cable statutory filing requ | (optional) in 90 days after filing.) Pursuant to 6 tirements, this date will not be li | 05.0207 (3 sted as th |
| ne record specifies a delayed effe ord is filed. | ctive date, but not an effective t | time, at 12:01 a.m. on the | earlier of: (b) The 90th day af | ter the |
| ora is filed. | | | | |
| January 19, Dated | 2024 | . 61 | Danie | |

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