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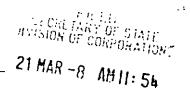
TO: Registration Section Division of Corporations The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Molly LINIS Firm/Company 4902 N MacDill AVE Apt 809 W FAMUUS NUML (KSS. COM
address: (to be used for future annual report notification) For further information concerning this matter, please call: at (240) 439 - 9911 Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

<u>Street Address:</u>

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(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 and assigned Florida document number <u>L2\000034793</u> 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 , Florida Cuy 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 = Manager

AMBR = Authorized Member Title **Address** <u>Name</u> 4902 N MacDill AVE Andd AMBR Molly Livis Apt 809 DRemove Tampa, Fl 33614 OChange AMBR Craig Dohuty 29777 Sea(01 St XAdd Clewrater, Fr 33761 ORemove _____ □Change _____ Change □Add _____ □Remove □Add _____ Remove ____ □Change _____ □Add _____ □Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	Theli Lighter FARY of State
when initially filling out the wholes of	JIVISION OF CORPORATION
olganization, I incollectly filled it out +	21 MAR -8 AMII: 54
did not put myself or me other owner,	
Craig Donesty as aumorized members, As	
evaig Donesty as aumorized members. As	
members robe able to make decisions on	
behalf of me business.	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.03. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	207 (3 Kb) as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	he
Dated FCWVWY 23 2021. MOILY MY	
Signature of a member or authorized representative of a member	
pignature of a member of audionized representative of a member	
MOILY LEWIS Typed or printed name of signee	

Filing Fee: \$25.00