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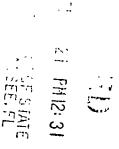
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APR 23 2021

COVER LETTER

Division of Corporations		
SUBJECT: Space 5 International Name of Limiter	Solution Solution	~ Lhc_
The enclosed Articles of Amendment and fee(s) are submi	itted for filing.	
Please return all correspondence concerning this matter to		
Israel (7C. Name of Person	
Israel's	Ther or S	solution LLC
511 3 Cate	-Losy D ddress	
Torqa E-mail address: (to	City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	C 15
For further information concerning this matter, please ca		
JScae Corna Name of Person	at (<u>8) S</u>) S Area Code	31 - 569 Paytime Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address:
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

The Articles of Organization for this Limited Liability Company were filed on 210000 52537 Florida document number 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

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.

City

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

r removed from our records.		
AGR = Manager		
AMBR = Authorized Member		

<u> </u>	<u>N</u> ame	Address	Type of Action
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Note: If the dat	e, if other than the date of filing:	suant to 605.02 not be listed
ord is filed	Ties a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	
Dated	121/2021 Signature of a member or authorized representative of a member	
	~	