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(Requestor's Name)
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S. CHATHAM

OCT -9 2022



COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Div	ision of Cor	porations			
eun illæt.	Arc Jets, LL	.c	•	ı	
SUBJECT:	· · · · · · · · · · · · · · · · · · ·	Name of Limi	ted Liability Company		
The enclosed	d Articles of .	Amendment and fee(s) are sub-	mitted for filing.		
Picase return	ı all correspo	ndence concerning this matter	to the following:		
		Cameron R. Monti			
			Name of Person		
		MDH Venture Capital, LL	C		
			Firm/Company		
		11022 Ayrshire Court			
			Address	•	
		Woodstock, IL 60098			
			City/State and Zip Code		
		emonti@mdhventurecapital	.com to be used for future annua	report notificatio	n)
For further i	nformation c	oncerning this matter, please ca		,	
Cameron R.	Monti		630 33 at ()	34-7605	
Name of Person		Area Code	Daytime Tele	phone Number	
Enclosed is	a check for th	ne following amount:			
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee Certified Copy (additional copy is er		☐ \$50.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	niling Addres			Address: ration Section	ı
Di	vision of C	orporations	Divisio	on of Corpora	tions

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Arc Jets, LLC		
(<u>Name of the Limited Liability</u> (A Florida)	Company as it now appears on our records. Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 02.08.21	and assigned
lorida document number L21000067570	·	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limit	ted liability company here:	SIANIG
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC"	or the abbreviation "L.L.C.".
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDR	<u> </u>	
		PH STATE
Enter new mailing address, if applicable:	-	
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, <u>enter t</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flo	orida
-	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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Douglas A. Herzog	129 Old Creek Road	∃ Add
		Palos Park, IL 60464	Remove
			□ Change
MGR	Malcolm D. Herzog	104 Paloma Drive	□Add
		Coral Gables, FL 33143	■Remove
			□ Change
			□Add
			□Remove
			☐ Change
			□Remove
			Change
			□Add
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Effective date, if other of the last of th	, the date must be spe ed in this block do	cific and cannot be es not meet the a	prior to date of fili			
e record specifies a dela rd is filed.	yed effective date,	but not an effec	tive time, at 12:0	a.m. on the earlier	of: (b) The 90th day	after the
Dated July 11		2027	1)			
		1	W//-			

Typed or printed name of signee