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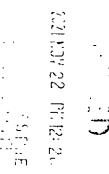
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A BUTTLER
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COVER LETTER

TO:

	tration Section of Corp			
	IAGNIFICE	ENT CAPITAL LLC		
SUBJECT: _		Name of Limi	ited Liability Company	_
The enclosed A	aticles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return al	l correspon	dence concerning this matter	to the following:	
		LUPO MAXIMILLIAN G		
			Name of Person	
			Firm/Company	
		8815 CONROY-WINDER	MERE RD. SUITE #342	
			Address	
		WINDERMERE, FL 3283	5-3129	
			City/State and Zip Code	
		max@magnificent.capital		_
For further infe	ormation cos	e-mail address: c	to be used for future annual report notification)	
Maximillian L	ирю		407 314-4114 at ()	
	Name of	Person	at ()Area Code Daytime Telephone Nu.	mber
Enclosed is a cl	heck for the	following amount:		
□ \$25.00 Fili	ing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee. ificate of Status & ified Copy fional copy is enclosed)
	ng Address: stration Se		Street Address: Registration Section	
Registration Section Division of Corporations			Division of Corporations	
P.O.	Box 6327	, -	The Centre of Tallahassee	
Talla	hassee, F	L 32314	2415 N. Monroe Street, Sui	te 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGNIFICENT CAPITAL LLC

2121 KDV 22 PR 12: 2c

Zip Code

(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 Li Florida document number L21000079164		were filed on $\frac{02/1}{}$	6/2021 and assigned		
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liab	ollity company her	<u>e</u> :		
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the des	signation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	able:	1270 Avenue of the Americas 7th Floor			
(Principal office address MUST BE A STREE	T ADDRESS)				
		New York, NY, US 10020			
Enter new mailing address, if applicable:		1270 Avenue of t	he Americas		
(Mailing address MAY BE A POST OFFICE BOX)		7th Floor			
		New York, NY, US 10020			
B. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent:	s here:	address on our red IT HOLDINGS LLC			
Name of New Registered Agent.		'-WINDERMERE RD. SUITE #342			
New Registered Office Address:	Enter Florida street address				
	WINDERMER	Е	Florida ³²⁸³⁵		

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

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
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docum	ent's effective dat	te on the Departme	nt of State's rec	ords.	radan	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
e recor	d specifies a delay	ed effective date, b	ut not an effect	ive time, at 12:	01 a.m. on the ea	rlier of: (b) Th	ne 90th day after the
rd is fil	led.						
	November 17Th		2021				
			2021	·			
Dated .		1 -40-57	TARI	`~ <i>a</i> ~	11		
Dated .	m			(// / -	1-3-4-5		
Dated .	MA	XXIII	1000	SHI		har	
Dated _.	MA	Signatur	y or a member of	authorized repre	sentative of a men	ber	

Filing Fee: \$25.00