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CORPORATE ACCESS, ____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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6001 POWERLINE LLC				
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DocuSign Envelope ID: 22EBBD14-AB00-4F6B-8CAD-51408ABED3FA COVER LETTER

TO: Registration Sec Division of Corp			
6001 Power	line LLC		
SUBJECT:	Name of Lim	ited Liability Company	· - · · · ·
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
		Name of Person	
	Gonzalez, Shenkman & B		
		Firm/Company	
	110 Professional Way		
		Address	
	Wellington, FL 33414		
	fgonzalez@gsblawfirm.con	City/State and Zip Code	
		to be used for future annual report not	ification)
For further information co	ncerning this matter, please co	all:	
Francisco J. Gonzalez, Es	q.	561 227-1575 at()	
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration Se		Registration Se	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Tallahassee, FL 32303

DocuSign Envelope ID: 22EBBD14-AB00-4F6B-8CAD-51408ABED3fA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6001 Powerline 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 02/19/2021 _ and assigned Florida document number L21000085348 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 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

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

DocuSign Envelope ID: 22EBBD14-AB00-4F6B-8CAD-51408ABED3FA II a)nending Authorized rerson(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	<u>Name</u>	Address	Type of Action
MGR	Andrey Naumov	1200 Wright Avenue, Richmond, CA 94804	≣Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			Change
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ocument's effective date on the Department of St	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 neet the applicable statutory filing requirements, this date will not be listed as
	State's records.
record specifies a delayed effective date, but not a is filed.	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
November 15	2021
DocuSigned	
andry	Matumou Recording or authorized representative of a member
2.ដ ែរ។ពេធ ៈល្មាយដ	Butter of authorized representative of a member

Filing Fee: \$25.00