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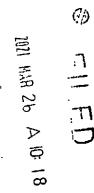
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Certified Copies	_ Certificates	s of Status
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## COVER LETTER

TO:	Registration Sect Division of Corpo		, •	ع بر مد جو	•
SUBJE	CCT.	Mombri	ın Dynasty LLC	·	
SUBJE	cci:	Name of Lin	nited Liability Company		_
The en	closed Articles of Ar	nendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	ence concerning this matter	to the following:		
			Bruceley Mombrun		
			Name of Person		<del></del>
			Mombrun Dynasty LLC		
			Firm/Company		
			1475 NE 121 ST		
			Address		
		N	orth Miami, Florida 33161		
		Den	City/State and Zip Code		_
			eley@mombrundynasty.co to be used for future annual r		
For fur	ther information con	cerning this matter, please c	all:		
	Bruceley Momb	run	917 at ( )	488-8672	
	Name of Po	erson	Area Code	Daytime Telephone Nu	mher
Enclose	ed is a check for the f	ollowing amount:			
<b>■</b> \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encle	Certi	0 Filing Fee, ificate of Status & fied Copy ional copy is enclosed)
	Mailing Address: Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	porations	Division The Cen 2415 N.	Iress: tion Section of Corporations tre of Tallahassee Monroe Street, Suit see, FL 32303	2001 MAR 26 A 10

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mombrun Dynasty LLC		
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Compa	opears on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company were filed or Florida document numberL21000086956	n February 22, 2021	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compan	<u>v here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Company."	the designation "LLC" or the abbre	viation "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)		<del></del>
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:  Name of New Registered Agent:	ir records, <u>enter the name o</u>	f the new registere
	<u> </u>	<del>-</del>
New Registered Office Address:	Florida street address	
	Florida ½ · · ·	<b>%</b>
City		
New Registered Agent's Signature, if changing Registered Agent:	:	Ap Code
hereby accept the appointment as registered agent and agree to act in the provisions of all statutes relative to the proper and complete performance eccept the obligations of my position as registered agent as provided for it is eing filed to merely reflect a change in the registered office address. I he company has been notified in writing of this change.	of my duties, and I am fam In Chapter 605   F.S.Or. if F	iliar with and

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>	<u>Address</u>	Type of Action
MGR	Bruceley Mombrun	67 Spring Brook Rd Nanuet, NY 10954	<b>=</b> Add
			□Remove
			□Change
AMBR	Bertran Mombrun	67 Spring Brook Rd Nanuet, NY 10954	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<del></del>			🗆 Add
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fective date	e, if other than the date	of filing:	(optional) 😤	Ø
an effective da	te is listed, the date must be spe	ecific and cannot be prior to date of filing	for more than 00 down all in Elizabeth and in	5:020
II III. U	are inserted in this block do fective date on the Departm	ics not micel the applicable statutory	filling requirements, this date will not be list	ted a
	•	2 1220 (40)	26	~
ecord specif	es a delayed effective date	but not an effective time at 12-01.	a.m. on the earlier of: (b) The 10th day aft	7
is filed.		out not an effective time, at 12.01	c.ii. on the earlier or: (b) The 90th day aft	the
			~ ~	
ited	March 11	2021	<del></del>	
	L	,		
		PAR		
	Signati	ure of a member or authorized represent	ative of a member	