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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CJP CONSULTINGFL, ELC

Account Number : I20160000015

: (954)391-1214 Phone

: (855461-3581 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CJPCONSUL hingfl

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCW INNOVATIONS LLC

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Fax: 8554613581

## H 21000 2970373 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCW Innovations LLC		
(Name of the Lim	ited Liability Company as it now appear (A Florida Lamted Liability Company)	s on our records.)
The Articles of Organization for this Limited	Liability Company were filed on $\frac{2/2}{2}$	4/2021 and assigned
Florida document number L21000091452		
This amendment is submitted to amend the fol		
A. If amending name, enter the new name	of the limited liability company he	<u>:re</u> ;
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if appli	cable;	SECRETARY SECRET
(Principal office address MUST BE A STRE	ET ADDRESS <sub>I</sub>	52
	——————————————————————————————————————	LICC 21
		ARE IN
Enter new mailing address, if applicable:		
Muiling address MAY BE A POST OFFICE	(BOX)	me p m
	Name of Address with page 1 - of the day designed	SSEE OF STATE
R. If amouding the registered want and in	annatas and 1997	를 <b></b> 0
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our re ess here:	cords, enter the name of the new registe.
Name of New Registered Agent:	TWR Worldwide LLC	
New Registered Office Address:	900 Bainbridge Loop	
	Enter Flori	da sn eet address
	Winter Garden	Florida 34787
	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. Thereby confirm that the limited liability company has been notified in writing of this change.

f Changing Registered Agent, Signature of New Registered Agent

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To: 18506176383		Page: 3/4	
	 1 /		

From: CJP ConsultingFL LLC

Fax: 8554613581

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
AMBR	Dog Island Industries	4213 Jan Cooley Dr Panama City Beach Ft. 32408	□Add
			JChange
AMBR	Dog Island Industries LLC	4213 Jan Cooley Dr Panama City Bench FL 32408	<b>≅</b> Add
			Remove
			□Change
			Fladd
			©Remove
			□Change
			□Add
			URemove
		10 Alice Abril - 11 Value   11 Alice   12 Al	∩Change
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Affective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be priouted. If the date inscrited in this block does not meet the application of the date inscribed on the Department of State's records.	cubie stattinity i	ang requiements	s, this date wil	I not be	listed as
record specifies a delayed effective date, but not an effective t l is filed.	ime, at 12:01 n.i	n, on the earlier o	f: (b) The 90	)th day a	ifter the
ated 3rd of August 2021					
ated 3rd of August 2021	·				
Signature of a member or auth					

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