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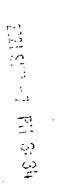
(Req	uestor's Name)	_
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aluelara

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: The	Nate Power	3 46	
		ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	Nathania	Name of Person	
	The Na	+ Power La	
	_		
	2868 Mo	nticello Place Address	#306
	Orlando, Fo	1 32835	
	nc/Dowell (a	City/State and Zip Code Papholding Sobe used for future annual report notion	.ion
	E-mail address: (to	be used for future annual report noti	fication)
For further information co	ncerning this matter, please ca	II:	
Nathania	Powell	at (904) 463 -	6268
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mame of the Limited Liability Compa (A Florida Limited I	110
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2100013453</u> 6	were filed on $3/3/2021$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	in Comment to the decimal and the second to
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2868 Monticello Place #306 Orlando, FL 32835
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2868 Monticollo Place #306 Orlando, FL 32835
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address: 2868	Monticello Place #336 Enter Florida street address
Orlan	100 , Florida 3-2835
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code ∴ Co
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
			□Add
		 	□Remove
			□Change
			□Add
			
		 ,.	□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
		-T	□ Remove
			□Change
			□Add
		 	□Remove
			□Change

_	The address for MGR Northaniel Pawell 3 incorrect. Please update address to:
_	incorrect. Please update address to:
_	
_	2868 Monticolo Place #306 Orlando, FL 32835
	Orlando, FL 32835
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in effe o <u>te:</u> l	ve date, if other than the date of filing:
ecord is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
ted _	Scrtamber 1 2021
	AMU Prie
	Signature of a member or authorized representative of a member
	Nathaniel Powell