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(Req	uestor's Name)	
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SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

TO:

Vibe Weal SUBJECT:	th LLC			
SOBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Rasheem Edward			
		Name of Person		
	Zenbusiness Inc			
		Firm/Company		
	5511 Parkcrest Dr. Suite 1	03		
	7.107	Address		
	Austin, TX 78731			
		City/State and Zip Code		
	fulfillment@zenbusiness.co			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Zenbusiness c/o Rasheer	n Edward	844 4936249 at ()		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 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:	anti a m	
Registration Section Division of Corporations		Registration Sc Division of Co		
P.O. Box 632	=	The Centre of		
Tallahassee, 1	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

Vibe Wealth LLC	707. A	5K 18 - 54 9: m·:
(Name of the Limited Liabil	ity Company as it now appears on o	ur records.)
(A Floric	lity Company as it now appears on of the Limited Liability Company) SECR TAL	ETARY OF STATE
		LAHASSEEFFL
•	Company were filed on <u>1920/202</u>	and assigned
Florida document number 1.21000140663		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Yice Enterprises LLC		
The new name must be distinguishable and contain the words "Lii	nited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		7
	-	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
N 16 11 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
If amending the registered agent and/or registered agent and/or the new registered office address here:		s. enter the name of the new regis
igent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	11 . 11	
	Enter Florida str	ver auaress
		Florida
	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. I hereby confirm that the limited liability company has been notified in writing of this change.

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>	<u>Name</u>	Address	Type of Action
AMBR	Anna Halama		🗖 Add
		401 Rosery Rd NE Suite 836 Largo, FL 33770	≣Remove
			□Change
			□Add
			□Remove
			□Change
	***		⊡Add
			🗆 Remove
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<u>iote:</u> If the	ate, if other than date is listed, the date date inserted in th effective date on th	is block does not	t meet the appli	cable statutory	or more than 90 days Iling requirements	optional) after filing.) Pursu s, this date will n	ant to 605,0207 ot be listed as
record spe l is filed.	cifies a delayed effo	ective date, but n	ot an effective	time, at 12:01 a	m. on the earlier c	of: (b) The 90th	day after the
ated			2022	·			
	/s/Thomas Yata	r					
-		Signature of	a member or auth	horized represent	tive of a member		