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Special Instructions to	Filing Officer:		

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Swellska,		
	Name of Lim	nited Liability Company	
		Name of Limited Liability Company Indirect and fee(s) are submitted for filing. See concerning this matter to the following: Solid Concerning	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		,	
		Joshua Weiner	
		Name of Person	
	5	11520 115	
		Firm/Company	
	20	C 0: 4	
		Address Ale.	15-ite 207
		Address . ,	
		Parajota, FL 34236	
		· /	
	E-mail address: L	be used for future annual report notification)	2, (cm
For further information c	oncerning this matter, please co		
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J054	ua Weiner	at (503) 784-2485)
Name o	rerson	Area Code Daytime Telephone	Number
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Division of C P.O. Box 632	•	•	24
Tallahassee, F		2415 N. Monroe Street, S	ie –
i anui assec, i	14 545 FT	Tallahassee, FL 32303	June 010

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SwellSRQ, 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 3/25/2021 and assigned Florida document number L21000141022 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 "LLC." 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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 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	Caroline Weiner	1623 North Drive	≣ ∧dd
		Sarasota, FL 34239	□Remove
			□Change
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