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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
3 .	HORNE MAY I L 2025	

Office Use Only



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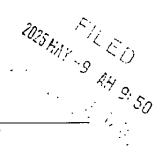
RECEIVED 2025 MAY -9 PM 3: 36

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>5/9/25</u>	**WAL	<i>K IN</i> ¹
NTITY NAME_A	ALTERNATIVE SUSTAINABILITY IP LLC	
OCUMENT NUM	(BER	
٠	**PLEASE FILE THE ATTACHED AND RETURN**	
	Plain Copy	
$\times \times \times \times$	Certified Copy	
 	Certificate of Status	
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendments	
	Certified Copy of Arts & Amendment's Complete File (Including Annual Reports)	
	Certificate of Status	
	Certificate of Status Reflecting:	
	APOSTILLE' / NOTARIAL CERTIFICATION	
DUNTRY OF DEST	TINATION	
UMBER OF CERTI	TFICATES REQUESTED	
OTAL OWED \$_	ACCOUNT # 120140000108 With Market Services, Inc.	ad
Please call Tina	ACCOUNT # 120140000108 United Corporate Services, Inc. at the above number for any issues or concerns. Thank you so much!	ad

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ALTERNATIVE SUSTAINABILITY IP 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 Florida document number L21000167334	were filed on	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 Liabi	lity Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:	1151 Walker Road #670, Dover, DE 199	04
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	1151 Walker Road #670, Dover, DE 199	04
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
	City	г ір Спас

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
MGR	STEVENS, JOHN	212 Warren St, Apt 1K, New York, NY 10282	□Add
			=Remove
			□ Change
MGR	GOETZE, JOHN	2273 Stockton Dr, Fleming Island, FL 32003	□Add
			Remove
			□Change
MGR	AS Tri Management LLC	1151 Walker Road #670, Dover, DE 19904	≣ Add
			□Remove
			□Change
			🗀 Add
			□Remove
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Effective date, if other than the If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	oust be specific and cannust block does not meet t	the applicable sta	f filing or more than state of the filing require	(optional) 90 days after filing.) Pu ements, this date wil	irsuant to 605.0207 i I not be listed as t
e record specifies a delayed effect ord is filed.	ive date, but not an e	ffective time, at 1	2:01 a.m. on the ea	arlier of: (b) The 9	0th day after the
Dated May 8	20)25			
Set Av-	Signature of a memb	per or authorized re	presentative of a men	nber	

Filing Fee: \$25.00