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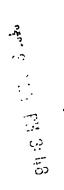
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ustry LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on <u>04/26/2021</u>	and assigned
Florida document number L21000191542		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited i	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		3
		·
		;
B. If amending the registered agent and/or registered off	ice address on our records, enter th	ne name of the new registe
ngent and/or the new registered office address here:		1.2
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Name of New Registered Agent:		<u>, 5</u>
New Registered Office Address:		
	Enter Florida street address	
	. Flor	ida
	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>	<u>Address</u>	Type of Action
AMBR	Greisha Ortega	5622 Napoleon CT Apt A Tampa, FL 33614	≣ ∧dd
			□Remove
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AMBR	Jose M. Hilario	5622 Napoleon CT Apt A Tampa, FL 33614	□Add
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ective date, if other than the done effective date is listed, the date must be te: If the date inserted in this block current's effective date on the Department specifies a delayed effective is filed.	be specific and cook does not me bartment of Sta	cannot be prior to set the applicab ate's records.	le statutory filir	ore than 90 days g requirements	s, this date wil	l not be listed
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Filing Fee: \$25.00