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COVER LETTER

TO:	Registration Se Division of Cou		,	*
SUBJE	·CT.	HOLDINGS, LLC	· · · · · · · · · · · · · · · · · · ·	,
			nited Liability Company	
The end	closed Articles of	Amendment and fec(s) are sul	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		DONALD B. MEDALIE		
			Name of Person	
		MEDALIE & MEDALIE.	P.A.	
			Firm/Company	
		800 E. BROWARD BLVI	D., SUITE 301	
			Address	
		FORT LAUDERDALE, F	L 33301	
			City/State and Zip Code	·
		dmedalie@medalielaw.com		
For furt	ber information co	oncerning this matter, please c	to be used for future annual report not	fication)
		-		
DUNA	LD B. MEDALIE		954 522-5303 at ()	
	Name of	f Person	Arca Code Daytım	e Telephone Number
Enclose	d is a check for th	e following amount:		
■ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Cl \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		0	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FII ED 2022 JUL -1 AHII: 41

SIENEMA HOLDINGS LLC

company has been notified in writing of this change.

(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 05/03/2021 ____ and assigned Florida document number L21000202750 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 "L.L.C." SOPHIE SIENEMA Enter new principal offices address, if applicable: 1630 E. LAS OLAS BLVD. (Principal office address MUST BE A STREET ADDRESS) FORT LAUDERDALE, FL 33301 SOPHIE SIENEMA Enter new mailing address, if applicable: 1630 E. LAS OLAS BLVD. (Mailing address MAY BE A POST OFFICE BOX) FORT LAUDERDALE, FL 33301 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 _, Florida ___ 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

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
MGR	SOPHIE SIENEMA	1630 E. LAS OLAS BLVD.	≣Add
		FORT LAUDERDALE, FL 33301	
			□Change
MGR	CRAIG SIENEMA	401 E. LAS OLAS BLVD., #130-356	[]Add
		FORT LAUDERDALE, FL 33301	
			□Change
			□ Add
			□Remove
			□Change
			
			□Remove
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Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member				
	•		Signature of a member of	authorized representative of a member	
SOPHIE SIENEMA			Typed or	nrinted name of signee	

Filing Fee: \$25.00