La1000a35853

(Re	equestor's Name)						
(Ad	ldress)						
(Ad	ldress)						
(Cil	ty/State/Zip/Phone	#)					
PICK-UP	☐ WAIT	MAIL					
(Bu	isiness Entity Nam	ne)					
(Document Number)							
Certified Copies	Certificates	of Status					
Special Instructions to	Filing Officer:						
	— 1 /2						
	712 	12/21 TM					

Office Use Only



500368850985

95/30/21--01011--001 **25.00

21 JUN 30 PM 1: 24

COVER LETTER

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A STATE OF THE STATE OF

M/Y DAY DI	REAMER 21 JUN 30 FM 12
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi	ility Company were filed on $\frac{05/20/2021}{2021}$ and assigned
Florida document number <u>LZ10002358</u>	753.
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	ne limited liability company here:
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
B. If amending the registered agent and/or regi agent and/or the new registered office address b	istered office address on our records, <u>enter the name of the new registered</u> nere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, 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:

The bound of the second MGR = Manager AMBR = Authorized Member 21 JUN 30 PH 1: 24 Type of Action **Address** Title Name JACQUELINE KALAPTCHIAN 7901 451 NI STE 300 XADD AMBIR STPETERSBUZG FL33702-Remove _____ □Change ______ Change _____ □Remove _____ □Change _____ □Remove _____ □Change _____ □ Remove □ Remove

__ □Change

To	ope.	n = b	ank	- 46	6001	<u>-1, 11</u>	c 50	nk	
ري.	י נאשרו זיין י	the.	AHB	12 +	bo be	lista	el a	, Alice	
-	1	!		<u>· ·</u>				· · · · · · · · · · · · · · · · · · ·	
<u> </u>	11512.	50]		 .					
			· · · · -						2 :
									
				- 	· · · · · ·		 		
									PH N
			<u> </u>					<u> </u>	24
							<u>-</u>		<u>.</u>
					<u></u>				
							···-		
				_		 			
					•••			·	
						······································			
						· · · · ·			
					<u></u>			===	
ective da	te, if other th	an the date	of filing	;;				(optional)	1
n effective d te: If the (late is listed, the clate inserted in	date must be spo a this block de	ceific and ses not m	cannot be p seet the ap	prior to date o	of filing or mor tutory filing	e than 90 da requireme	iys after filing nts, this date	;) Pursuant to 605.0 will not be listed
	ffective date o					, ,	·		
	fies a delayed	effective date,	but not	an effecti	ve time, at	2:01 a.m. or	the earlie	r of: (b) Th	he 90th day after
s filed.									
	1,10	7 /		フィン	1				
ted	-UNE		/- ;	232	`'				
	lune	,	1_k	<u> </u>	,-/-	-			
-		Signat	ure of a n	nember of	uthorized re	presentative o	f a member		
		/		17					