L21000257034

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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Divi	sion of Cor	porations			
	AMIAN BI	ROKERS INTERNATIONAL	LLC		
SUBJECT:]	Name of Limited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
		indence concerning this matter	-		
ricase return.	an correspo	incence concerning this matter	to the following.		
		JOANNE FARRAR, CPA			
	Name of Person				
		JOANNE FARRAR CPA	PA		
	Firm/Company				
		12773 WEST FOREST H	ILL BLVD, STE 1201		
			Address		
		WELLINGTON, FL 3341	4		
			City/State and Zip Code		
		admin@wellingtoncpa.net			
		E-mail address: (to be used for future annual report no	lification)	
For further inf	formation c	oncerning this matter, please co	all;		
JOANNE FARRAR, CPA		561 790-2092			
Name of Person		at () Area Code — Dayin	ne Telephone Number		
Enclosed is a	check for th	e following amount:			
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ing Address		Street Address:	action	
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMIAN BROKERS INTERNATIONAL 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 06/02/2021 and assigned Florida document number 1.21000257034 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 20x60 DRESSAGE LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 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: JOANNE FARRAR CPA PA Name of New Registered Agent: 12773 WEST FOREST HILL BLVD, STE 1201 New Registered Office Address: Enter Florida street address , Florida 33414 Zip Code WELLINGTON Circ

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:

or removed from our records:						
MGR = M $AMBR = M$	MGR = Manager AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action			
-			□ Add			
			□Remove			
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	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (, ck does not meet the applicable statutory filing requirements, this date will not be listed as the
he record specifies a delayed effective ord is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated OCTOBER 2	. 2024
16	
	in acture of a member or authorized representative of a member
JAIME MELGAREJO A	MIAN
	Typed or printed name of signee

Filing Fee: \$25.00