L21000259164

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COVER LETTER

Division of Corpor	rations	▼	
SUBJECT: For	nt Lauderd Name of Lim	ale Title Photited Liability Company	SLLC
The enclosed Articles of Am	nendment and fec(s) are sub	omitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	Leande	Manue of Person	
•	Fort	Lauderdale Ti-	HE PLISHC
	271 NE 38	Th Street APT all	9
		Olty/State and Zip Code	
	+ Wenty for E-mail address: (to be used for future annual report noti	ication)
For further information conc	erning this matter, please ca	all:	
Leander Me Name of Pe	<u>rson</u>	at (<u>454</u>) <u>226 —</u> Area Code Daytim	0593 e Telephone Number
Enclosed is a check for the fo		, , , , , , , , , , , , , , , , , , ,	
☐ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec		<u>Street Address:</u> Registration Sec	
Division of Corp	orations	Division of Cor	porations

P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Fort Lauderda	le Title P	lust Let CPAI2 23
(Name of the Limited Liabi (A Florid	lity Company as it now appears of the Limited Liability Company)	on our records. 19 10 See 1 3 14 15
The Articles of Organization for this Limited Liability	Company were filed on Ju	ne 3, 2021 and assigned
Florida document number <u>L2100025916</u>	<i>t</i>	,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here	:
Twenty Four marketing. The new name must be distinguishable and contain the words "En	Group LLC	
The new name must be distinguishable and contain the words "Eff	nited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	******	
D 16		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our rec	ords, <u>enter the name of the new registered</u>
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.

II 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
			□Remove
			Change
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
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fecti	ve date, if other than the date of filing:			((ptional)	
an effe ote:	ective date is listed, the date must be specific and c If the date inserted in this block does not me	cannot be prior to	date of fi	ling or more than 90 days	after filing.	Pursuant to 605,0207
cum	ent's effective date on the Department of Sta	ate's records.	ic statut	ory ming requirements	. this date	will not be listed as
ecor	d specifies a delayed effective date, but not a	n effective time	. at 12:4	Mannan the ancline o	ር (አ ነ . ፕե	Outh day of
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ato.l	September 5th	7.13				
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		X				
	Signature of a mo	ember or authoriz	zed repre	sentative of a member		·
	Leande	r Mcc	σM	b		
		vocd or printed	name of	sienee		

Filing Fee: \$25.00