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2021 JUL 14 PM 1: 12 SECRETARY OF STATE TALLAHASSEE TALLAHASSEE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: () eek Ve First LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Glandon Witherspoon
SCEK YE FIRST LLC Firm/Company
14311 Biscarge Blvd Unit #521
North Miami, FL 33181 City/State and Zip Code
G. With respect to be used for future annual report notification)
For further information concerning this matter, please call:
Glandon With a Spoon at (305) 785-4971 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Solution Silver Solution Status Solution

Mailing Address:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
gent and/or the new registered office address here: Name of New Registered Agent:	
gent and/or the new registered office address here:	
	:
	ed office address on our records, <u>enter the name of the new register</u>
Muning address MAT BE AT OUT OF THEE BOAY	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	
	OZI JUL ALLA
Principal office address MUST BE A STREET ADDI	(A . N
inter new principal offices address, if applicable:	
he new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
a. If amending name, enter the new name of the lim	nited liability company here:
his amendment is submitted to amend the following:	
lorida document number <u>L 210002 81513</u>	·
	Company were filed on Jinc 17, 2021 and assigned
	LC lity Company as it now appears on our records.) la Limited Liability Company)
(A Florida	It I wised I had the Company

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<u>AMB</u> R	Glandon Witherspan	14311 Biscayne Blu	<u>d.</u> □Add
		Uni+ # 521	□Remove
		North Miani, FL 33181	Change
Member	Adrien Witherspan	14311 Biscayne Blvd.	🗖 Add
		Mit # 521	□Remove
		North Micmi, Fl 33181	Change
			🗆 Add
		, d	Change A
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		SE SE	_ BANG TTI
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			□Change
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			DChange
			□Add
			□Remove

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* #	Change AMBR	Glendon	Withersy	2000	from	CED	<i>+0</i>	
*	Change Demba	Adrian	Withersp	900 F	0 (0m)	17200	19 <u>6</u> 7	•
						SECRETAR TALLAH!	2021 JUL 11	
						YOF STATE	+ PH : 12	7
							1	
reffective te: If the	ate, if other than the date is listed, the date is date inserted in this effective date on the	iust be specific and can block does not meet	not be prior to date of filing the applicable statutor is records.	ng or more than s	(option 00 days after fements, this	الممالك أمانا	ant to 605. ot be liste	0207 d as
s mea.			ffective time, at 12:01			The 90th	daylafter	the
ed(July 7+	dan Juli- Signature of a memb	2021 Userspecies er or authorized represe	ntative of a merr	ber			
_		Glendon	With The Spu	°0∕)				