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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

:4	V)I	
5.	14	
·	LEPRIME LLC	
(Name of the Limited	Lightity Company as it now was a second	
(<u>)</u>	Liability Company as it now appears on our records.) Florida Lunued Liability Company)	
The Articles of Organization for this Limited Line	1.00 o o o o o o o o o o o o o o o o o o	
	bility Company were filed on07/06/2021	and assigned
Florida document number <u>L210003096</u>	581	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited Hability company here:	
he new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the al	observation "L.L.C."
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET.		== =
CONCEPTE OFFICE ABBRESS NOST BE A STREET.	ADDRU:88)	
	The second secon	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BU) ()	
Annual and the second of the second	<u></u>	· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or regi	istered office address on our records, enter the nam	e of the new regis
gent and/or the new registered office address b	iere:	3
		*")
Name of New Registered Agent:		C
e i musi servizeni vederoskik o videriji		, <u>, , , , , , , , , , , , , , , , , , </u>
New Registered Office Address:		!
····	Enter Florida street address	:
	City	Zio Coda

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 jurther 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.

______ □Remove

□ Chango

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 Title **Name** Address Type of Action **MGR** CONRADO TELLO, AXEL 199 W PALMETTO PARK RD UNIT A BOCA RATON, FL 33432 XIRemove _______□Add ______ \Remove ______ □Change _____ DAdd _____ DRetnove _____LiAdd _____ DRemove _____ Change _____ □Remove _____ □Change Dh∧C _____

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Note: IT the	te, if other than the date of filing:
If the record spec record is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	September 9th 2023
	Jack 19, 703 11.59 EDT)
	Signature of n member or authorized representative of a member
	20110 1171111
	SOLIS, JAVIER Typed or printed name of signee
	Eypert or printed name of signee