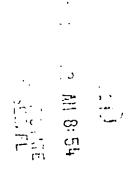
L21000310510

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer.

Office Use Only



800368281868



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/12/202	21			
	007.14	W D C 4	**WALK	<i>【 I</i> №
ENTITY NAME_	367 Ma	arcello Bivo		
DOCUMENT NU	JMBER_			
		PLEASE FILE TH	HE ATTACHED AND RETURN	
xxxxx		Plain Copy		
		Certified Copy		
		Certificate of Status		
	**P	CLEASE OBTAIN THE FO Certified Copy of Arts Certificate of Good Sta		
	-		NOTARIAL CERTIFICATION**	
COUNTRY OF DE NUMBER OF CEA		TES REQUESTED		
TOTAL OWED	\$25.00		ACCOUNT #: 120160000072	
Please call Ti	ina at th	e above number for	any issues or concerns. Thank you so much!	

COVER LETTER

Registration Section

TO:

Divis	sion of Cor	porations		
	367 Marcel	lo Blvd LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing	
Please return :	all correspo	ndence concerning this matter	to the following:	
		Fabrizio Lengua		
			Name of Person	
		ZenBusiness INC.		
		<u> </u>	Firm/Company	~
		5511 Parkerest Dr. Suite 2	07	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.cc		
			to be used for future annual report no	diffication)
For further int	formation c	oncerning this matter, please c	all:	
Fabrizio Leng	gua		512 237-7349 at ()	
	Name o	f Person		me Telephone Number
Enclosed is a	check for th	ne following amount:		
≘ \$25.00 Fi		S30.00 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 Addres		Street Address:	action
~	istration S ision of C	orporations	Registration S Division of Co	
P.O.	Box 632	7	The Centre of	
Tall	ahassee, F	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

367 Marcello Blvd LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our record bility Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company was document number <u>L21000310510</u> .	rere filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		<u></u>
		•
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
water built		3
		· · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and/or registered office ad	dress on our records, enter	the name of the new regis
gent and/or the new registered office address here:	<u> </u>	-10 - U1
		, lu
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street daaress	`
		orida
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Allamanda Partners LLC	500 East 77th #430	□Add
		New York, NY 10162	
			■Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
		<u>.</u>	□Change
			□Remove
			□Chanee

Page 2 of 3

Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
ffective date, if other than the date of filing:	
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will locument's effective date on the Department of State's records.	
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs Kote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ocument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	suant to 605.020' not be listed as
The 90th day after the record is filed.	he earlier o
ated	
Paul Nicholas Cordasco Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	 -

Page 3 of 3

Filing Fee: \$25.00