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Division of Corporations

Fax Number : (850)517-6383

From: Account Name : FASTKIT CORP

Account Number : I20100000009 .

Phone : (305)599-08391

Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NAMA INVE	ISTMENTS LLC		
(Name of the l	(Monda Laboration)	nany as it now appears on our records.) of infultive Company (
The Articles of Organization for this Limite Florida document number L21000311950	d Liability Compan	ly were filed on JULY 07, 2021	and as	signed
This amendment is submitted to amend the	following:			
A. If amending name, unter the new nam	e of the limited lial	bility company here:		
N A				
The new name must be distinguishable and contain the	e words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "l	I. C
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		N/A		
		N/A		
		N/A		
inter new mailing address, if applicable:		N/A		
Mailing address MAY BE A POST OFFICE BOX)		N/A		
		N/A		
If amending the registered agent and/or ent and/or the new registered office addr		address on our records, enter the nam	ne of the ne	w registe
Name of New Registered Agent:				
New Registered Office Address:	N/A			-
		Enter Florida su eet address	•	i i
	N/A	, Florida	<u>-</u>	<u></u>
		Cuy	Zio Code	39

New Registered Agent's Signature, if changing Registered Agent:

Y,

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

Title	Name	Address	Type of Action
AMBR	MARILYN COLINA	5866 NW 113 PL	■Add
		MIAMI, FL 33178	DRemove
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		AUGUST	01, 2023			
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AUGUST 01	Signature of a mei		rized represent	ative of a menst	er .	

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