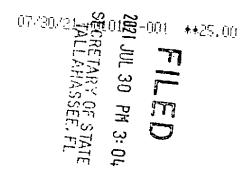
## L21000333272

(Re	questor's Name)	
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## **COVER LETTER**

TO: Registration Se- Division of Cor					
	entures LLC				
SUBJECT:	Name of Limi	ited Liability Company	<u>, , , , , , , , , , , , , , , , , , , </u>		
The enclosed Articles of	Aniendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Laurah Boswell				
		Name of Person			
	Broad Financial LLC				
		Firm/Company		SEC SEC	2021
	1 Paragon Drive, Suite 270				<b>=</b>
		Address			ر ا
	Montvale, NJ 07645			SECRETARY OF STATE	P. S
		City/State and Zip Code		— ji s	ب
	orders@broadfinancial.com				<del>1</del> 1
	E-mail address: ()	to be used for future annua	d report notification)		
For further information c	oncerning this matter, please co	ali:			
Laurah Boswell		845 3: at ( )	52-3000		
Name o	f Person	Area Code	Daytime Telephor	ne Number	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is e		\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	
<u>Mailing Addres</u> Registration S			Address: tration Section		
Division of C			on of Corporation	ns	
P.O. Box 632		The C	entre of Tallahass	see	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Soulshine Ventures LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) inted Liability Company)	
The Articles of Organization for this Limited Liability Com- Florida document number 1.21000333272	pany were filed on July 22, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
Abundantia Ventures LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2021 SECT
Principal office address MUST BE A STREET ADDRES	<u> </u>	RETAIN 3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PM 3: 04
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, enter th	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter 1 to har areel taturess	
	. Flori	da
	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 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
			🗆 Add
			□Remove
			Change
			□Add
			Remove
			S 200 Change
			JUL 30 PH
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cord specifies a delayed effe s filed.	ctive date, bu	t not an effe	ective time	, at 12:01 a.	m. on the ea	rlier of: (b) Ti	ne 90th o	iay after 1
cd July 26		, 2021						
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Filing Fee: \$25.00