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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
	inagement LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Caleb Nichols		
		Name of Person	
	Decora Management LLC		
		Firm Company	
	3225 McLeod Drive, Suite	: 100	
		Address	
	Las Vegas, Nevada 89121		
		City State and Zip Code	
	ra@andersonadvisors.com		
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please o	all:	
Caleb Nichols		800 706-4741	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Sec	tion
Division of C	lorporations	Division of Corp	orations
P.O. Box 632 Tallahassee,		The Centre of Ta	illahassee Street, Suite 810
rananassee,	1 6 75.17	Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Decora Management LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records. ad Liability Company))
the Articles of Organization for this Limited Liability Compartorida document number $\frac{1.21000342314}{1.000342314}$.	ny were filed on 07/28/2021	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "El.C" (_
Enter new principal offices address, if applicable:		,
Principal office address MUST BE A STREET ADDRESS)	 	
·		
		7:
Enter new mailing address, if applicable:		22:
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic	e address on our records, <u>enter th</u>	ae name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:		i da

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
AMBR	Property Remodeling LLC	3225 McLeod Drive, Suite 100	□Add
		Las Vegas, Nevada 89121	□Remove
			■Change
			□Add
			Remove
			□Change
			□Add
	_		□Remove
			□Change
		 	
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			∏Change

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			<u>5</u>
			
ctive date, if other than the effective date is listed, the date muses. If the date inserted in this blument's effective date on the D	e date of filing: st be specific and cannot be prior to a lock does not meet the applicable partment of State's records.	late of filing or more than 90 e statutory filing requirem	(optional) days after filing.) Pursuant to 605.0 nents, this date will not be listed
ord specifies a delayed effectiv filed.	re date, but not an effective time	, at 12:01 a.m. on the earl	ier of: (b) The 90th day after t
August 9th	Signature of a member of authoriz	,	
0: 1 01			
Kuabay Hogg.	1.0		