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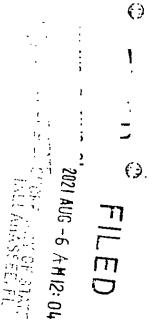
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations		•
SUBJECT:	PAULY IDGT 110		•
SOBJECT.	PAULY, IDGT LLC Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ondence concerning this matter to	o the following:	
	A	lex Paul	
		Name of Person	
		Firm/Company	
	80	Blue Ridge Way	
		Address	
	Davi	e, FL, 33325 City/State and Zip Code	
		008 O fiv. edv be used for future annual report notif	
For further information of	concerning this matter, please cal	II:	
Alex	Paul	ov 786 × 380-9	1300
Name o	of Person	at (<u>776</u>) <u>380-9</u> Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration		Street Address: Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 632	-	The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAULY IDGT LL (Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)					
(A Florida Limited Liab	olity Company)					
The Articles of Organization for this Limited Liability Company we Florida document number <u>121000348171</u> .	ere filed on August 02, 202	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liability	y company here:					
Pavly 1DGT LLC The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and the new name must be distinguishabl						
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:	Pembroke Pines, FL, 33024					
(Principal office address MUST BE A STREET ADDRESS)	Pembroke Pines, FL	, 33024				
Enter new mailing address, if applicable:	9361 NW 18th St					
(Mailing address MAY BE A POST OFFICE BOX)	Pembroke Pines, FL,	33024				
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	lress on our records, <u>enter the</u> Enter Florida street address Florid	FILED AND -6 AM 12: 04				
	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
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record specifies a I is filed.	delaye	d effective d	late, but not ar	n effective time	, at 12:01 a.	m. on th	e carlier o	of: (b)	The 90th day after t	he
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