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COVER LETTER

TO: Registration So Division of Cor					
	VE. N. LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing			
	ondence concerning this matter	_			
	GARRETT WILKES				
		Name of Person			
	K&R TAX ACCOUNTIN	G SERVICES LLC			
		Firm/Company			
	2853 S. SOSSAMAN RD	STE A-101			
	·	Address			
	MESA, AZ., 85212				
		City/State and Zip Code			
	info@krtaxes.com	to be used for future annual report not	47		
For further information of	concerning this matter, please c		meanon)		
Garrett Wilkes		480 392-6801 ex	it 114		
Name o	of Person		ne 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 (additional copy is enclosed		
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee,		The Centre of 1 2415 N. Monro	Fallahassec be Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

405 6TH AVE. N. LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/10/2021}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LAC" or the abbreviation "L.I. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 2853 S. SOSSAMAN RD., STE. A-101 (Mailing address MAY BE A POST OFFICE BOX) MESA, AZ., 85212 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

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.

City

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	WF Freedom Fund I Managers LLC	2853 S. SOSSAMAN RD., STE A-101	□Add
		MESA, AZ., 85212	□Rem o ve
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			□Add
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effective d te: If the c	te, if other than the date is listed, the date must be date inserted in this bloc ffective date on the Dep	oe specific and canno k does not meet th	re applicable stat	filing or more than utory filing requi	optional) 190 days after filing rements, this date) Pursuant. 	to 605.0207 pe listed as
cord speci i filed.	fies a delayed effective	date, but not an efi	fective time, at 1	2:01 a.m. on the	earlier of: (b) T	ne 90th da <u>r</u>	y after the
ed	Jan 05 2022						
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		gnature of a membe					1

Filing Fee: \$25.00