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	To:					
		Division of Corporations				
	70		: (850)617-6383			
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2021 OCT	**Enter	the email addre	ess for this business entit lings. Enter only one emai	y to be used for future l address please.**		
	Sm.	ail Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MILLICOR, LLC

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ARTICLES OF AMENDMENT TO

H210003727623

ARTICLES OF ORGANIZATION **OF**

		LLICOR, LEC		C. 64	
	(Name of the Limited Liability (A Florida)	Company as it now appears of Company)	n our records.)	10 88	
.		7 1. 1	August 16, 2021	ربر الله الله الله الله الله الله الله الل	
The Articles of Organization	for this Limited Liability Co	ompany were filed on		_ and assigned	
Florida document number	L21000365846	<u>.</u>		َ	
This amendment is submitted	to amend the following:				
A. If amending name, ente	r the new name of the limit	ed liability company here	:		
The new name must be distinguish	able and contain the words "Limit	red Liability Company," the design	gnation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices	address, if applicable:				
(Principal office address MI	IST BE A STREET ADDR	<u> </u>			
					
Enter new mailing address,	if applicable:				
Mailing address MAY BE	POST OFFICE BOX)				
B. If amending the register agent and/or the new regist		office address on our reco	ords, <u>enter the name (</u>	of the new registere	
Name of New Regi	stered Agent:				
New Registered Of	fice Address:				
		Enter Florida street address			
			, Florida		
		City		Zip Code	
New Registered Agent's Sign	ature, if changing Registered	Agent:			
I hereby accept the appoint provisions of all statutes re accept the obligations of m being filed to merely reflectompany has been notified	lative to the proper and co y position as registered ag t a change in the registered	mplete performance of m ent as provided for in Cha	y duties, and I am fan apter 605, F.S. Or, if	niliar with and this document is	
		If Changing Registered Agent	, Signature of New Regist	ered Agent	
		* - *			

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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	STEVEN PAUL SABGA	1614 Pine Bluff Avenue	
		Orlando, FL 32809	≣Remove
			□ Change
MGR	STEVEN PAUL SABGA	1614 Pine Bluff Avenue	■ Add
		Orlando, FL 32809	□Remove
			□ Remove
			□Change
			Remove
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	fies a delayed effective d			n. on the earlier of: (b) The 90th day afte	r the
ated	October 4	2021				
		And the second second				
_	Sig	nature of a member or	authorized representat	ive of a member		
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