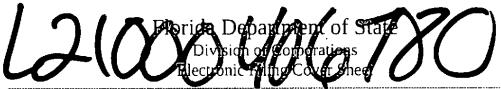
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Fax Number : (636)617-0363		
From	Account Name : REGISTERED AG Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010	l	
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

CASA AMORE LLC

(A Flore	da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L21000406780	Company were filed on 09/14/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
	-	
Enter new mailing address, if applicable:		_
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here: Name of New Registered Agent:		name of the new register
New Registered Office Address:	Enter Florida street address	la Zip Code''
	, Floric	la Zio Code:
New Registered Agent's Signature, if changing Register	red Agent:	
I haraby accept the approintment as registered agent		ar ziaroa to cominhi with

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
AMBR	Mridula Vijay Gupta	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	⊠ Remove
			□Change
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record specifies a delayed e d is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
Dated 02/17	2022	
		
Kilw	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	