Florida Department of State Diagon of Compositions

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			
CINGIL	MUUICSS.			

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIETE QUATRO VENTURES, LLC

Certificate of Status	0
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Page Count	04
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Help

ARTICLES OF AMENDMENT TO * ARTICLES OF ORGANIZATION OF

Siete Quatro Ventures, 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 $\frac{09/14/21}{2}$ and assigned Florida document number L21000407237 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 "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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.

New Registered Agent's Signature, if changing 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
AR	TAYLOR PENN	3735 FRANKLIN ROAD, SUITE 253	
		ROANOKE, VA 24014 UN	⊠Remove
			□Change
MGR	Brandon Whitley	2223 highlander dr se	⊠Add
		Kentwood, MI 49508	□Remove
			□Change
			□Add
			□Remove
			□Change
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Affective date, if other than fan effective date is listed, the date Note: If the date inserted in the locument's effective date on t	nis block does no	t meet the applica	to date of filing tible statutory i	or more than 90 o	(optional) days after filing ents, this date) Pursuant to 605.0 will not be listed	0207 (d as t
record specifies a delayed ef Lis filed.	fective date, but n	ot an effective ti	ne, at 12:01 a	m, on the earli	er of: (b) Th	e 90th day after	the
ated August 30		2022	. ·				
		R: Lung Pa	.k				
**************************************	Signature of	a member or author		nive of a membe	er	,	
Riley Parl	k						

Filing Fee: \$25.00