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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Orlando Pro	lessional (leaning Ll	_ C
	Name of Limited Liability Co	ompany	
The enclosed Articles of Amendment and	I fee(s) are submitted for filin	g.	
Please return all correspondence concern			
Pa	Stra M. He Name of	Person	
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bha	nandez givor mail address: (to be used for tu	ture annual report notification	o. Com
For further information concerning this n	natter, please call:		
Boates M. Her	at (<u>3</u> Area	Z1) 3 40 - 16 Code Daytime Telept	o 2 O none Number
Enclosed is a check for the following am	ount:		
□ \$25.00 Filing Fee S30.00 Fi Certified	te of Status Certifie	-	2 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporation The Centre of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

imited 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 $\frac{9/15/2}{}$ and assigned Florida document number <u>L2 1000 409 18.6</u> 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 "L.L.C." 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

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 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
MBR	Beating M. Hernander	#501 or proge Et 3585	- <u>2</u> (5.Kdd
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record is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ited _	October 7 . 2021.
	Signature of a member or authorized representative of a member
	Bearn Hernander Typed or printed name of signee