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From: Venerable Law Firm

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Division of Corporations

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			: (850)617-6383) 1 7
F	rom:			
		Account Name	: VENERABLE CORPORATE AND TRUST SERVICES, LLC	2
		Account Number	: I20210000107	1
		Phone	: (813)284-4727	
		Fax Number	: (813)436-8460	÷
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ON POINT RESTORATION LLC

Certificate of Status	0
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Help

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TO: Registration Section Division of Corporations ON POINT RESTORATION LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASON SAMPSON

Name of Person

Venerable Corporate and Trust Services, LLC

Firm'Company

301 West Platt Street, No. 657

Address

Tampa FL 33606

City/State and Zip Code

jsampson@venerable.law

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call-

Enclosed is a check for the following amount:

🗑 \$25.00 Filing Fee

Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S50.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

From: Venerable Law Firm

ARTICLES OF ORGANIZATION OF

ON POINT RESTORATION 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 ______ and assigned ______ and assigned Florida document number ______.

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 Liab	ihty Company," the designation "LLC" or	the abbreviation "L L C."
Enter new principal offices address, if applicable:	ffices address, if applicable: 301 West Platt Street	
(Principal office address MUST BE A STREET ADDRESS)	No. 657	, <u>, , , , , , , , , , , , , , , ,</u>
<u>In the management of the second s</u>	Tampa FL 33606	1
	<u> </u>	۰.
Enter new mailing address, if applicable:	301 West Platt Street	
	No. 657	
(Mailing address MAY BE A POST OFFICE BON)	Tampa FL 33606	<u></u>

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	VENERABLE CORPORAT	E AND TRUST SERVICES.LLC			
New Registered Office Address:	301 W PLATT ST NO. 657				
New Registered Office Address:	Enter Florida street address				
	Tampa	Florida			
	Cip	Zip Code			

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.

fason Sampson If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

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<u>Title</u> AMBR	<u>Name</u> Faust, brandon	<u>Address</u> 1536 S MISSOURI AVE STE A	Type of Action
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		CLEARWATER. FL 33756	
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		Sheridan. WY 82801	■∧dd
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From: Venerable Law Firm

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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