(3/17/21, 3:44 PM

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A. Account Number : 075350000065

Phone : (954)525-7500 Fax Number : (954)761-8475

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 4725 LAKEVIEW PARKWAY HOLDINGS LLC

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K. SALY

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	KWAY HOLDINGS LLC	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
(Name of the Limited Liability Com (A Florida Limite	пяпу дя it now uppeurs on our red Llubility Company)	cords.)	
The Articles of Organization for this Limited Liability Compar	ly were filed on November 1	5, 2021 and assigned	
Florida document number L21000490701		•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia			
The new name must be distinguishable and contain the words "Limited Lia	bility 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 malling address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>er</u>	nter the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	, Florida	
	City	гр сове	

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each 31000425695g added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Nume	Address	Type of Action
MGR	Greg Lyon	4800 N. Federal Highway	 X Add
		Suite 201B	
		Boca Raton, Ft. 33487	- 0.
MGR	Massimo Musa	4800 N. Federal Highway	<u> </u>
		Suite 20113	Remove
		Boca Raton, FL 33487	
MGR	Tre Fratelli Holdings Group LLLP	4800 N. Federal Highway	
		Suite 201B	₩ Remove
		Boca Raton, FL 33487	Change
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ective date, if other than the effective date is listed, the date must set: If the date inserted in this blowment's effective date on the De	be specific and car ick does not incer	mot be prior to a the applicable	date of filing or t	nore than 90 days:	ptional) alter filing.) Pursu this date will no	ant to 605.0207 of he listed as
cord specifies a delayed effective s filed.	date, but not an	effective time	:, át í 2:01 a.m.	on the earlier of	f: (b) The 90th	day after the
ed November 17	· .	1021	·			
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