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(((H21000459886 3)))



H210004598863ABCA

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

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.

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Certificate of Status	0
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DEC 2 0 2021

S. PRATHER

ARTICLES OF AMENDMENT • TO ARTICLES OF ORGANIZATION OF



IDFC Services, 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 11/16/21and assigned Florida document number L21000492398 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." 870 N Miramar Ave #404 Enter new principal offices address, if applicable: Indialantic, FL 32903 (Principal office address MUST BE A STREET ADDRESS) 870 N Miramar Ave #404 Enter new mailing address, if applicable: Indialantic, FL 32903 (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>	Name	Address	Type of Action
AMBR	Shannon Wenger	870 N Miramar Ave #404	Z Add
		Indialantic, FL 32903	□Remove
			□Change
AMBR	Clayton West	870 N Miramar Ave #404	ØAdd
		Indialantic, FL 32903	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			C Change

). If amending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
70		
		
		
<u></u>		
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. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	the date of filing: must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. s block does not meet the applicable statutory filing requirements, this date will not be liste e Department of State's records. ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	0207 (3)(t d as the
the record specifies a delayed effected is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	海21 DE
Dated December 17	2021 SSEE C	FILED C 17 PH
	Rilly Park	>> ₹ ○
Dilay Davis	Signature of a member or authorized representative of a member REAL OFF	ED PM 2: LG
Riley Park	. Typed or printed name of signee	

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Filing Fee: \$25.00