## L21000502916

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	INC. P.O. Box 3	236 East 6th Avenue. Tallahassee, Florida 32303 7066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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NOVAC EQUITIES LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000502965</u> . This amendment is submitted to amend the following:	were filed on <u>11/23/2021</u> and assigned	
A. If amending name, <u>enter the new name of the limited liab</u>	illity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	25 SW 9th Street,	
(Principal office address MUST BE A STREET ADDRESS)	Suite 202	
	Miami, FL 33130	
Enter new mailing address, if applicable:	25 SW 9th Street,	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 202	
	Miami, FL 33130	
B. If amending the registered agent and/or registered office		

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

Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	25 SW 9th Street, Suite 202	
	E	Inter Florida street address
	Miami	, Florida <sup>33130</sup>
	City	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.

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 person being added or removed from our records:

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## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JAKE DAMELIO	25 SW 9th Street	🗆 Add
		Suite 202	
		Miami, FL 33130	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated	2022
Sake	Signature of a member or authorized representative of a member

JAKE DAMELIO

Typed or printed name of signee