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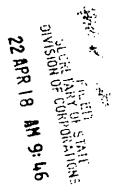
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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T. MATTHEWS MAY 20 2022

COVER LETTER

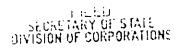
Registration Section Division of Corporations

TO:

Yno'l Wea	Ith LEC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Jenny Countz					
	<u> </u>	Name of Person				
	ZenBusiness Inc.					
		Firm/Company				
	5511 Parkerest Drive, Suit	te 103				
Address						
	Austin, TX 78731					
		City/State and Zip Code				
	fulfillment@zenbusiness.co					
	E-mail address: (to be used for future annual report not	ification)			
For further information c	oncerning this matter, please c	all:				
Jenny Countz		844 493-6249 at ()				
Name of Person		Area Code Daytin	ne Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres Registration 9 Division of C	Section	Street Address: Registration Se Division of Co				
P.O. Box 632			Division of Corporations The Centre of Tallahassee			
Tallahassee.	FL 32314	2415 N. Monro	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



YnoT Wealth LLC

22 APR 18 AM 9: 46

(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 $\frac{12/06/2021}{12/06/2021}$ and assigned Florida document number 1.21000513491 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 "LLC." 1317 Edgewater Dr Enter new principal offices address, if applicable: Suite 6421 (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32804 1317 Edgewater Dr Enter new mailing address, if applicable: Suite 6421 (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32804 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.

_, Florida ___

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
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
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		·	□Add
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Fective date, if other than a neffective date is listed, the date of the listed in this cument's effective date on the	s block does not r	neet the applical	date of filing or mor ble statutory filing	(option re than 90 days after fi requirements, this c	n al) ling.) Pursuant to 605,020 late will not be listed a
cord specifies a delayed effe s filed.	ctive date, but not	t an effective tim	ie, at 12:01 a.m. or	the earlier of: (b)	The 90th day after th
		2022			
ed April 7			<u> </u>		
ted April 7 /s/ Almajid Nob	Lou			f a member	