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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divisi	ion of Cor	porations		
	Ever Youn	g Orlando LLC.		
SUBJECT: _		Name of Lim	ited Liability Company	_
The suslessed of	A mainlen of	A mandanant and fac(a) and sub-	mitted for filing	
		Amendment and fee(s) are sub		
Please return a	ll correspo	ndence concerning this matter	to the following:	
		Eric Reyes		
			Name of Person	
		Traction Management Cor	poration	
			Firm/Company	
		12995 Broleman Road		
			Address	
		Orlando, FL 32832		2022 Sec
			City/State and Zip Code	2022 FEB 11 SECRETARY
		eric.reyes@icloud.com		
		E-mail address: (to be used for future annual report notification)	
For further info	ormation c	oncerning this matter, please c	all:	A 1
Eric Reyes			407 310-0096 at ()	9: 06 9: 06
-	Name o	f Person	Area Code Daytime Telephone Nur	nber
Enclosed is a c	check for th	ne following amount:		
□ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	O Filing Fee, ificate of Status & fied Copy ional copy is enclosed)
	ing Addres		Street Address:	
_	istration S sion of C	orporations	Registration Section Division of Corporations	
	Box 632		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5

4Ever Young Orlando LLC		图 平
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) a Limited Liability Company)	-
	December 6, 2021	
The Articles of Organization for this Limited Liability (Company were filed on	and assigned
Florida document number L21000513576	_ -	9. 0
This amendment is submitted to amend the following:		THE B
A. If amending name, enter the new name of the lin	nited liability company here:	
4Ever Young Lake Ivanhoe LLC		
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	(RESS)	
Trincipul Office was coo 1200 - 200		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
	-1 -cc - dduse en eun mesende enten th	o name of the new registers
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the	te traine of the new registered
agent und of the new regions to control		
Name of New Projectored Agents		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Remove
			□Change
			□Add
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`an effective date i Note: If the date	f other than the date of s listed, the date must be spe inserted in this block doe tive date on the Departme	cific and cannot be pr es not meet the app	licable statutory fil	more than 90 days after ing requirements, thi	filing.) Pursuant to 605.02
record specifies d is filed.	a delayed effective date,	but not an effective	e time, at 12:01 a.m	n. on the earlier of: (b) The 90th day after th
Pated	February 1	2022	_		
		. //			
	Usi	11662			
	Signatu	ure of a member or au	thorized representati	ve of a member	