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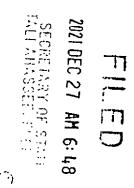
(Re	questor's Name)	<u> </u>
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☐ PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
J. HO	RNE	
JAN 1	U 2022	

Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp			
	AMG Greneleie	117	
SUBJECT:		ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
		Stoven Jay Colen Name of Person	
		M310 LLC	
	6.3.4	Firm/Company	
	7/14 V	a Fillnze	
		Address	
	Boen	Anton, FL 33433 City/State and Zip Code	
		City/State and Zip Code	 _
	E-mail address: (to	Cuhen @ M3 - 10 Cun be used for future annual report notification	n)
For further information co	oncerning this matter, please cal		
Stwa ?	Jay (uhen	u 347, 468 6429	,-)
Name of			phone Number
Enclosed is a check for the	e following amount:		
S25.00 Filing Fee	S30.00 Filing Fee &	☐ \$55.00 Filing Fee &	S60.00 Filing Fee.
Ü	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration S Division of Co		Registration Section Division of Corporat	
P.O. Box 6321		The Centre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 DEC 27 AM 6: 48

AMC C	renelate LLC	2021 020 2 ·	ne sili
(Name of the Limited L	Inhility Company as it now appear	SECRETARY SECRETARY	<u> </u>
(A)	Inches L. C. Isability Company as it now appear lorida Limited Liability Company)	ars on our records.	S.
The Articles of Organization for this Limited Liabilifordia document number	lity Company were filed on _	12 06-2021	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company h	nere:	
The new name must be distinguishable and contain the words Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	::	designation "LLC" or the abbr	eviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>		
B. If amending the registered agent and/or regis		records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Europe El.	orida street address	
	Enter Pa	maa sireet aaaress	
-	C**.	Florida	Zip Code
	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 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
MGR	Steven Jay Color	7114 V.a Tilenze	□Add
		Boca Palor, TL 33433	⊡Remove
			□Change
[n6/1	Ame Referry Holdings	184 Grand V. en Avance	🗹 Add
		Monsey, NY 10952	Remove
			□Change
MGR	M310 LLC	7/14 Va Cume	[] Add
		Occa Ration, FL 33433	□Remove
			□Change
			□Add
			□ Remove
		<u> </u>	□Change
			□Add
		 	□Remove
			□Change
		□Add	
			□Remove
			□ Change

lf amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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f an effectiv Note: If th	date, if other than the date of filing:
record sp d is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	12-22 2021 20
	Signature of a member or authorized representative of a member
	Stever- Jay Cohen
	Typed or printed name of signee

Filing Fee: \$25.00