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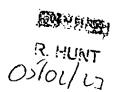
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COVER LETTER

TO: Registration S Division of Co				
	L DIVERSITY ENTERPRISES	LLC		
SUBJECT:				
SUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	DR PRESTON ADAMS			
	······	Name of Person	· · · · · · · · · · · · · · · · · · ·	
	GENERAL DIVERSITY I	ENTERPRISES LLC		
		Firm/Company	***	2023
	3415 W. LAKE MARY BI	ND #951361		7023 H+7 -3
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	LAKE MARY FL 32795		(n) (n) 1 (n) 0	3 17
	P_adams@bellsouth.net	City/State and Zip Code	TAIE .	64 iS
	E-mail address: (to be used for future annual report notifi	cation)	
For further information	concerning this matter, please c	all:		
DR PRESTON ADAM:	S	407 399-0513		
Name	of Person	at () Area Code Daytime	Telephone Number	_
Enclosed is a check for	the 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 F Certificate of S Certified Copy (additional copy is	Status &
			158.75 10:135	
Mailing Addre		Street Address:	• •	
Registration		Registration Sec		
	Corporations	Division of Corp		
P.O. Box 63 Tallahassee.		The Centre of Ta		
rananassee.	11. 32314	2415 N. Monroe Tallahassee, FL	Street, Suite 810 = 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GENERAL DIVERSITY ENTERPRISES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) DECEMBER 28: 2021 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number 1.21000519581 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GDE ENTERPRICES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 3415 W LAKE MARY BLVD #951361 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) LAKE MARY FL 32795 Enter new mailing address, if applicable: (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 _, Florida _

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 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
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Dated	Signature of a member	or authorized r	epresentative of a r	nember			