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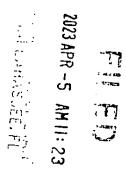
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COVER LETTER

	tegistration Se Division of Cor			
0-1-1-1-2-20	NEO ASTR	RA LLC		
SUBJECT	l:	Name of Limi	ned Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please reti	ırn all correspo	ondence concerning this matter	to the following:	
		ARSENIY GRUSHA		
			Name of Person	
		NEO ASTRA LLC		
			Firm/Company	
		2980 NE 2071H STREET	SUITE 705	20'
			Address	23 AF
		AVENTURA, FL 33 180		2023 APR -5 AM II: 23
		CURIOTIANO CEONOLAI	City/State and Zip Code	<u> </u>
		CHRISTIAN@CFONGLA	to be used for future annual report not	ification)
For further	r information c	oncerning this matter, please co	all:	် ကို ယ
CHRISTI.	AN FONG		786 607-3664	
	Name o	f Person	Area Code Daytir	ne Telephone Number
	-			
Enclosed i	s a check for th	he following amount:		
□ \$ 25 00) Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
R	<u>Jailing Addres</u> Legistration Solvision of C	Section	Street Address: Registration So Division of Co	
P	O. Box 632	.7	The Centre of	Tallahassee
1)	allahassee, l	FIL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEO ASTRA LLC		
(Name of the Limited Liability Comp (A Florida Limited	nny as it now appears on our records Liability Company)	<u>*</u>)
The Articles of Organization for this Limited Liability Company Plorida document number 1.21000527401	were filed on 12/14/2021	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lial	pility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		202
Principal office address MUST BE A STREET ADDRESS)		·
		; 7Ö ====
		in _
Inter new mailing address, if applicable:		1717 I (1817)
Mailing address MAY BE A POST OFFICE BOX)		71: 23
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Flortda street address	
	Emer Florida sireer adaress	
	, Flo	orida
	GH)	zaji conc

New Registered Agent's Signature, if changing Registered Agent:

100 1000 1110

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
AMBR	ARSENIY GRUSHA	2980 NE 207 STREET SUITE 705	= Add
		AVENTURA, FL 33180	□Remove
			Change
AP	LAW OFFICE OF CHRISTIAN FO	237 S DIXIE HIGHWAY, 4TH FLOOR, SUITE 46	7 □ Add
		CORAL CABLES, FL 33133	■Remove
			□Change
			□Adđ
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Add
			□Remove
			□ Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
_	
(If an effect <u>Note:</u> If	date, if other than the date of filing:
f the record s ecord is filed	pecifies 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	March 10 2023
	Signature of a member or authorized representative of a member
	Arseniy Grusha
	Typed or printed name of signee