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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Leonardo Heidner		
	·	Name of Person	<del></del>
	Heidner Law Firm, P.C.		
		Firm/Company	
	60E 42nd Street		بن م 2
		Address	
	New York, N.Y. 10165		22 SEP 21 FH 3: 10
		City/State and Zip Code	0
	leo@heidnerlaw.com		
or further information c	ti-mail address: ( oncerning this matter, please c	to be used for future annual report noti	fication)
Leonardo Heidner	one mater, presse	212 3029867	
Name o	f Person	at ( )	e Telephone Number
		7.1.2	Telephone Asimica
Enclosed is a check for th	ne 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)
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	ction
Division of C	orporations	Division of Cor	
P.O. Box 632	7	The Centre of T	`allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ICONBA	Υī	UNIT	907	1.1.	(``

iited Liability Company as it now app (A Florida Limited Liability Compan	<u>ears on our records.)</u> y)
Liability Company were filed on	01/19/2022 and assigned
llowing:	
of the limited liability company	here:
words "Limited Liability Company," th	ne designation "L.L.C." or the abbreviation "L.L.C."
icable:	
ET ADDRESS)	
E BOX)	22 SEP 21 PH
•••	r records, enter the name of the new regi
-	
	Florida street address
Miami Beach	, Florida
	Liability Company were filed on filed on filed liability company words "Limited Liability Company," the licable:  [ET ADDRESS]  [Fer registered office address on our ress here:    5255 Collins Ave. Apt. 10H

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
			Add
			□Remove
			☐ Change
			⊒Add
			□Remove
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			□Remove
			□Change

ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more  fote: If the date inserted in this block does not meet the applicable statutory filing re  ocument's effective date on the Department of State's records.	22 SEP 21 PH
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resiment a creetive date on the Department of State 8 fectors.	quirements, tins date will not be fisted a
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t is filed.	he earlier of: (b) The 90th day after th
August 19 2022	
ned	
Vin Alle	
Signature of a member or authorized representative of	