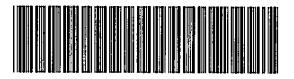
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SECRETARY OF STAT

A. BUTLER MAR 2 - 2022

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: TROY BORDER L'UC. Name of Limited Liability Company						
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Bugra Toplusoy Name of Person						
Troy Border LLC Firm/Company						
3829 Westgate Are Unit 1						
West Palm Beach FL 33409 City/State and Zip Code bugra Oshiptroy. com E-mail address: (to be used for future annual report notification)						
Email address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Bugra Toplusoy at (561) 2709282 Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)						

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

TROY BO	RDER	LLC		M_6: [,]
(<u>Name of the Limited</u> (A	Liability Compan Florida Limited Li	y as it now appears on lability Company)	our records.	
The Articles of Organization for this Limited Lial		1	SECRETARY 0 / 317420225	·
Florida document number <u>L22 000 6 1</u>	<u>590</u> .			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>he limited liabi</u> l	lity company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ty Company," the design	ation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:		3829 W	estgate Ave	Suite 1
(Principal office address MUST BE A STREET ADDRESS)		WestPalm	Beach Fl	33409
Enter new mailing address, if applicable:	Same as	above		
(Mailing address MAY BE A POST OFFICE BO	<u>9X)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office an <u>here</u> :	ddress on our recor	ds, <u>enter the name of</u>	the new registered
Name of New Registered Agent:	Bugo	a Topluse)4	
New Registered Office Address:	3829	Westgote Enter Florida si	Ave Suit	e 1
	West Pal	lm Beach	Florida <u>33</u>	n Code
New Registered Agent's Signature, if changing Re-	oistered Avent	City		yr coue

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
			Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			∏ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated 02/16/2022. Signafure of a member or authorized representative of a member