## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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MAR 22 2022

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number L2200058386	were filed on 02/03/22	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liah	oility company here:					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the al	obreviation "L,L,C,"				
Enter new principal offices address, if applicable:	1317 EDGEWATER DR					
(Principal office address MUST BE A STREET ADDRESS)	SUITE 3817					
	ORLANDO, FL 32804					
Enter new mailing address, if applicable:	1317 EDGEWATER DR					
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 3817					
	ORLANDO, FL 32804					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>					
Name of New Registered Agent:		2022 HAR				
New Registered Office Address:	Enter Florida street address	R 2				
	Emer ravida street agaress					
	, Florida	Zin Coden				
New Registered Agent's Signature, if changing Registered Agent		23				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	eperformance of my duties, and I am,	familiar with and				

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, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MRKT SERVICES LLC	6160 WARREN PKWY	□Add
		SUITE 100	□Remove
		FRISCO, TX 75034	<b>X</b> iChange
			□ Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
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			□ Change
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			🗆 Remove
			□Change

Typed or printed name of signee